



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Monroe County YMCA Release Form and Waiver of Liability

_____ (Name of Participant) has permission to use the YMCA and participate in YMCA programs. I hereby do declare myself to be physically sound, having medical approval to participate in the _____ program.

I hereby agree, for myself and my heirs, assigns, personal representatives, executors and administrators to waive, release, and forever discharge the YMCA and its respective directors, officers, and employees of all rights, claims, or demands therefore which I may have or which I may hereafter accrue to me arising out of injury to myself or my property incurred in the connection with the use of the property, facilities, or services of the YMCA, whether such damages are caused by the negligence of the releases or otherwise.

Assumption of Risk

I hereby agree that I bare the sole risk of injury resulting from my use of the property, facilities, and services of the YMCA and hereby assume full responsibility for and risk of any bodily injury, death, or property damage arising from such use, whether caused by the negligence of the releases or otherwise.

If I am under 18 years of age, I must provide the signature of my parent/guardian.

Signature of Student _____ Date: _____

Signature of Parent/Guardian _____ Date: _____