

BURKE STATION SWIM CLUB GUEST RELEASE, WAIVER OF LIABILITY, ASSUMPTION OF RISK AGREEMENT ("AGREEMENT")

The undersigned user hereby executes this Agreement for himself/herself and any minors, under their control and supervision.

I am aware of the inherent risks associated with use of the Burke Station Swim Club and hereby assume full responsibility for any and all such risks.

In consideration of being permitted to use Burke Station Swim Club, I hereby waive, release and forever discharge and hold harmless Burke Station Swim Club, Burke Station Citizens Association, its directors, employees, volunteers and other agents from all liability, demands, claims for damages, injuries and loss to person or property, which may be sustained or occur during use of the Burke Station Swim Club, whether or not such damage or loss is due to negligence.

I hereby give my permission for any manager or employee associated with Burke Station Swim Club and Titan Pool Service, Inc. to seek and give appropriate medical attention in the event of accident, injury or illness. I will be financially responsible for any and all costs associated with any necessary medical attention and/or treatment.

COVID-19:

According to the US Centers of Disease Control and Prevention, there is no evidence that the virus that causes Covid-19 can be spread to people through the water in swimming pools. Proper operation and maintenance, including disinfecting with chlorine, should inactivate the virus in the water.

Burke Station Citizens Association, Burke Station Swim Club and Titan Pool Service, Inc have taken enhanced health and safety measures for our lifeguards, volunteers, Members and guests. Everyone is expected to follow new guidelines and instructions. Covid-19 is an extremely contagious disease that can lead to severe illness and death. There is an inherent risk of exposure in any public place and around other people. According to the CDC, senior citizens and those with underlying medical conditions are especially vulnerable.

By accessing the Swim Club facilities, you assume all risks related to Covid-19 for yourself and family.

The terms of this Agreement are agreed to and accepted by:

SIGNATURE

DATE

PRINTED NAME

NAME OF SPONSORING MEMBER.

LIST ADDITIONAL FAMILY MEMBERS (FULL NAMES):

Guest Address: _____

Guest Phone Number: _____

Guest Email: _____