Meet Date: Saturday August 18th, 2018

Warm-Up Time 8:00 AM

Meet Start Time: 9:00 AM



Hosting Facility: SLC Sports Complex

Address: 445 S.C. valous 2004 SIC UT 84108

FORM

Address: 645 S Guardsman Way SLC UT 84108

Notes: Meet will be in the 50m outdoor pool

Entries Due to Jesse Gambrell By Wednesday, August 15th, 2018

jgambrell@slco.org

jgambrell@slco.org				
NAM	E: BI	BIRTHDAY:		
GI	RLS	BOYS		
EVE	NT # CIRCLE UP TO 3	EVENTS EVENT #	:	
	1 200 M Freest	yle 2		
	3 50 M Stroke S	wim 4		
	5 100 M Freest	yle 6		
;	7 200 M Individual	Medley 8		
	9 50 M Freest	yle 10		
1	1 100 M Stroke S	Swim 12		
1	3 50 M Stroke S	wim 14		
1	5 400 M Freesi	yle 16		
1	7 400 M Individual	Medley 18		
1	9 50 M Freest	yle 20		
	21 100 M Stroke S			
2	23 100 M Freest	yle 24		

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Hosting Facility: SLC Sports Complex

FORM VERSION 5.26.2017

Sports Complex—Masters Meet

Name of Participant			
Birthday			
Address	_ City	State	ZIP
Email			
Emergency Contact (other than guardian)		Phone	
STATEMENT OF AGREEMENT - ASSUMPTION O	F RISK, LIABILITY R	ELEASE AND REFUND POLI	CY
Assumption of Risk: I hereby acknowledge and agree that my participation in hazards which may expose my child, or me, to illness, injury, or death. In consi my executors and administrators, freely and voluntarily agree to assume and a in Salt Lake County recreational activities. Release: In consideration of my child's participation in the Salt Lake County recreations are to the salt Lake County and its officers, agents, and employees from now have, or have in the future, against Salt Lake County on account of person of, or in any way related to my child's participation in Salt Lake County recreations.	deration of my child's accept any and all risks eational activities, I, fo any cause of action, can injury, property da	coarticipation in such activities, I for to my child or myself associated r myself, my child, my heirs, my e aim, or demand of any nature w	or myself, my child, my heirs, with my child's participation executors and administrators that soever I or my child may
Indemnification: In consideration of my participation in the Salt Lake County recreand employees from any and all causes of action, claims, demands, losses, or child's participation in the Salt Lake County recreational activities. I agree th attorney fees, litigation and court costs, expert witness fees, and any sums expany settlement, arbitration award, or verdict paid or incurred on behalf of the Lake County recreational activities.	ational activities, I agree costs of any nature wh nat my duty to defend pended by or assessed	atever cause by, arising out of, c and indemnify the County under against the County for the defen	or in any way related to my this Agreement includes all se of any claim or to satisfy
<u>Refund:</u> Refunds may only be requested in person and must be accompanied by Recreation Division may withhold 25% of the refund (program registration to program.	·		•
<u>Collections:</u> I agree to pay Salt Lake County all costs incurred, together with runderstand that any account delinquent 30 days or more will be turned over to		ees in the event that my account	is referred for collection.
Emergency Treatment: I hereby authorize Salt Lake Parks and Recreation progremergency involving participant and agree to assume full responsibility for all	·='		· -
Media Consent: I hereby grant permission to Salt Lake County to use my or my chi educational purposes in any and all publications and media without limit or con		leotaped image, quotes/comment	s, or name for publicity and
Name Posting: Unless otherwise indicated below, Salt Lake County is authorized to activities on the Salt Lake County website.	o post or publish the no	me of my child participating in Sc	alt Lake County recreational
I do not authorize Salt Lake County to post or publish the name of my child partic	cipating in Salt Lake C	ounty recreational activities on th	e Salt Lake County website.
By signing this assumption of risk, liability release, and refund policy statement, I ack and disclosure, and that I agree to its terms. If any portion of this Agreement is remainder shall, notwithstanding, continue in full force and effect.	=		
Name of Participant:			
Signature (Parent or Legal Guardian):		Date:	