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|  **SWIMMER REGISTRATION—PROFILE** |
| First Name \*\* |  |
| Middle Name |  |
| Last Name \* |  |
| Gender \* | Female Male |
| Birth Date \* |  |
| Home Phone \* |  |
| Cell Phone \* |  |
| Email \* |  |
| Street \* |  |
| City \* |  |
| State \* |  |
| Zip \* |  |
| Club (Club Abbreviation or OEVT) \* |  |
| Member Number \* |  |
| **ADDITIONAL DATA ENTRY** |
| Emergency Contact Name \* |  |
| Emergency Contact Phone \* |  |
| 1650 Seed Time \* |  |
| T-shirt Size | WS WM WL WXL MS MM ML MXL |

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| **SWIMS ENTERED & OTHER PURCHASES** |
| **X** | Base Entry Fee | $40.00 |
|  | 1-Mile Race | $50.00 |
|  | 2-Mile Race **OR** 2 by 1-Mile Relay | $50.00 |
|  | USMS One Event Membership | $15.00 |
|  | Electronic Processing Fee (if paying by CC) | $1.50 |
|  | **TOTAL FEES** |  |

**PARTICIPANT WAIVER AND RELEASE OF LIABILITY,
ASSUMPTION OF RISK AND INDEMNITY AGREEMENT**

For and in consideration of United States Masters Swimming, Inc. (“USMS”) allowing me, the undersigned, to participate in any USMS sanctioned or approved activity, including swimming camps, clinics, and exhibitions; learn-to-swim programs; swimming tryouts; fitness and training programs (including dryland training); swim practices and workouts (for both pool and open water); pool meets; open water competitions; local, regional, and national competitions and championships (both pool and open water); and related activities (“Event” or “Events”); I, for myself, and on behalf of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the “Agreement”);

1. I hereby certify and represent that (i) I am in good health and in proper physical condition to participate in the Events; and (ii) I have not been advised of any medical conditions that would impair my ability to safely participate in the Events**.** I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the Events.
2. I acknowledge the inherent risks associated with the sport of swimming. I understand that my participation involves risks and dangers, which include, without limitation, the potential for serious bodily injury, sickness and disease, permanent disability, paralysis and death (from drowning or other causes); loss of or damage to personal property and equipment; exposure to extreme conditions and circumstances; accidents involving other participants, event staff, volunteers or spectators; contact or collision with natural or manmade objects; dangers arising from adverse weather conditions; imperfect water conditions; water and surface hazards; facility issues; equipment failure; inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the Event organizers; and other undefined, not readily foreseeable and presently unknown risks and dangers (“Risks”). I understand that these Risks may be caused in whole or in part by my own actions or inactions, the actions or inactions of others participating in the Events, or the negligent acts or omissions of the Released Parties defined below, and I hereby expressly assume all such Risks and responsibility for any damages, liabilities, losses or expenses that I incur as a result of my participation in any Events.
3. I agree to be familiar with and to abide by the Rules and Regulations established by USMS, including any safety regulations. I accept sole responsibility for my own conduct and actions while participating in the Events.
4. I hereby Release, Waive and Covenant Not to Sue, and further agree to Indemnify, Defend and Hold Harmless the following parties: USMS, its members, clubs, workout groups, event hosts, employees, and volunteers (including, but not limited to, event directors, coaches, officials, judges, timers, safety marshals, lifeguards, and support boat owners and operators); the USMS Swimming Saves Lives Foundation; USMS Local Masters Swimming Committees (LMSCs); the Event organizers and promoters, sponsors and advertisers; pool facility, lake and property owners or operators hosting the Events; law enforcement agencies and other public entities providing support for the Events; and each of their respective parent, subsidiary and affiliated companies, officers, directors, partners, shareholders, members, agents, employees, and volunteers (individually and collectively**,** the “Released Parties**”**), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense (including court costs and reasonable attorneys’ fees) of any kind or nature (“Liability”) which may arise out of, result from, or relate in any way to my participation in the Events, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties.
5. I further agree that if, despite this Agreement, I, or anyone on my behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities which any may be incurred as the result of such claim.

I hereby warrant that I am of legal age and competent to enter into this Agreement, that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up substantial legal rights by signing it (including the rights of my spouse, children, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors, and assigns), acknowledge that I have signed this Agreement without any inducement, assurance, or guarantee, and intend for my signature to serve as confirmation of my complete and unconditional acceptance of the terms, conditions and provisions of this Agreement. This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements, or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

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| Last Name | First Name | MI | Sex (circle) M F | Date of Birth (mm/dd/yy) |
| Street Address, City, State, Zip |
| Signature of Participant | Date Signed |

**RESTON ASSOCIATION WAIVER
PARTICIPATION IN EVENT/ATHLETIC EVENT ON RESTON FACILITIES**

 I hereby voluntarily register for the 2020 Jim McDonnell Lake Swims to be held on May 24, 2020. I understand and acknowledge that the 2020 Jim McDonnell Lake Swims (“Activity”) are sponsored and promoted by the Reston Masters Swim Team.

 I hereby assume all risk and agree to accept full responsibility and liability for any damages or bodily injuries I or any of my dependents may cause, sustain or suffer arising out of participation in the Activity, including any such damages or bodily injuries occurring during, resulting from or related to any travel to and from the Activity.

 I hereby agree to be fully liable for and I hereby agree to waive and release on behalf of myself and my heirs, successors and assigns, the Reston Association, its Board of Directors, officers, employees, agents, volunteers, members and anyone operating by or through the Reston Association from any and all injuries, bodily injuries, costs, damages, causes of action, claims, attorney’s fees and any consequential, special, punitive, statutory and incidental damages arising out of or resulting from any injury, death or damage to property which I or my dependent may sustain, suffer or cause as a result of my participation in the above referenced Activity, including any such injuries, costs, damages, causes of action, claims, attorney’s fees and any consequential, special, punitive, statutory and incidental damages occurring during, resulting from, or related to any travel to and from the Activity.

 I further agree to indemnify, reimburse and forever hold harmless the Reston Association, its Board of Directors, officers, employees, agents, volunteers, members and anyone operating by or through the Reston Association from any and all injuries, bodily injuries, costs, damages, causes of action, claims, attorney’s fees and any consequential, special, punitive, statutory and incidental damages arising out of or resulting from any injury, death or damage to property which I or my dependent may sustain, suffer or cause as a result of my participation in the above reference Activity, including any such injuries, costs, damages, causes of action, claims, attorney’s fees and any consequential, special, punitive, statutory and incidental damages occurring during, resulting from, or related to any travel to and from the Activity.

 I am aware that participating in the Activity is purely voluntary and inherently dangerous. I hereby certify, warrant and agree that I am aware of the risks associated with participation in the Activity and hereby accept and assume on behalf of myself or dependent full responsibility for any and all such risks including, without limitation, the need to check with a physician before engaging in this Activity, including any physical activity associated with this Activity. I understand that participation in this Activity may involve actives where injury can occur and shall be undertaken at my sole risk and expense. I hereby certify that I am physically fit and have not been otherwise informed by a physician. I understand that Reston Association does not employ physicians and its staff cannot diagnose medical problems.

 I further agree to observe and to be bound by the rules and regulations of Reston Association and promulgated by Reston Masters Swim Team.

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(Signature) (Date)

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(Print Name)