

## Adult Sports Waiver Form 2016

In consideration of the use of the Barrington Middle School and its facilities, the undersigned agrees as follows:

1. **RISK FACTORS:** The undersigned understands and acknowledges that the use of equipment, facilities and services provided by the Town of Barrington Recreation Department involves risks such as, but not limited to, the following which might result from the use of equipment or facilities, from the activity itself, from the acts of others, or from the unavailability of emergency medical care - RISK OF PROPERTY DAMAGE, BODILY INJURY, AND POSSIBLE DEATH, and that he assumes all risks that arise from, but not limited to, those risk factors described above.
2. **RELEASE:** The undersigned releases the Barrington Recreation Department and the Town of Barrington, its employees and agents, and agrees not to sue them on account of or in conjunction with any claims, causes of action, injuries, damage, cost of expenses arising out of the activity, including those based on death, bodily injury or property damage whether or not caused by the acts, omissions or other fault of the parties being released.
3. **EMERGENCY TREATMENT CONSENT:** The undersigned, as a participant in the subject activity, hereby consents to medical treatment in a medical emergency where the undersigned is unable to consent to such treatment.
4. **ACKNOWLEDGMENT:** The undersigned has read and understands this agreement.

If under the age of 18, the waiver must be signed by a parent/legal guardian

Print: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION:

Name of Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_