

**CITY OF TERRELL -AQUATICS & RECREATION PROGRAMS WAIVER**

**Adult:** I hereby certify I am over the age of 18 years and am physically able to participate in the Aquatics and Recreation Program and other Pool Activities sponsored by the City of Terrell.

**Minor:** I give permission for my child to participate in the City of Terrell Aquatics and Recreation Program (“Program”), and I certify that my child is physically and mentally able to take part in the Program.

I understand and have explained to my child the Pool & Park Rules and Regulations. We will abide by all rules and regulations governing this Program as well as any parent or guardian accompanying my child.

In case of an emergency, I give the City of Terrell staff permission to seek emergency care and transportation for myself (or my child) through the local emergency medical services system if needed.

I understand this activity and the risk involved, and that staff and volunteers teach the classes. I further understand that any financial responsibility for injuries is mine and must be covered by myself or by my own insurance.

In consideration for being allowed to participate in the City of Terrell Aquatics and Recreation Program, I hereby release, discharge and hold harmless the City of Terrell, its assignees, officers, agents employees, volunteer, and officials and their successors from any and all liability for personal injury (including death), emotional distress or loss of support that may be incurred or resulting from my (or my child's) participation in the City of Terrell Aquatics and Recreation Program, except where the same is caused by the willful misconduct of the City of Terrell, its employees or agents.

*By accepting these Terms & Conditions, I understand and agree to the registration process including cancellation policy, refund policy, pool rules & regulations, accident waiver, and Emergency Information Form.*

Dated this \_\_\_\_ day of \_\_\_\_\_, 2026.

Adult Participants Signature: \_\_\_\_\_

Child’s name: \_\_\_\_\_

Signature of Parent or Legal Guardian: \_\_\_\_\_