Acknowledgement of Risk & Hold Harmless Agreement Community Services Department Aquatics

Notice: The group leader/organizer is responsible for signing and returning this document and for making parents/guardians aware of the information found below

I. Acknowledgement of Risk

I am fully aware of the special dangers and risks inherent in participating in aquatic related activities. By participating in aquatic activities in the City of Chandler, Community Services – Aquatics, I acknowledge that I could sustain various injuries, including physical injury, death, or other consequences arising or resulting from the activity. I further acknowledge that I am in good physical health and that I can participate in physical activities, which may be strenuous.

II. Responsibilities for Emergency Care

In consideration of this possibility, I hereby consent to emergency transportation and treatment necessary in the event of injury or illness. I hereby accept responsibility for the payment of any emergency transportation and treatment expenses, and any subsequent medical bills.

III. Release

I hereby assume all risk of injury or liability and waive any fight of recovery from, or to bring suit against, the City of Chandler, Community Services – Aquatics, its employees or agents, for any personal injury, death, or other consequences out of my participation or use of aquatic activities or facilities.

IV. Indemnification

I agree to indemnify, defend and hold harmless the City of Chandler, Community Services – Aquatics, its agents or employees from all loss, costs, damage, injury, liability, claims and causes of action whatsoever, arising out of or related to my negligent and/or intentional acts, errors and omissions while participating in or using any aspect of the City of Chandler, Community Services – Aquatics programs or facilities.

| I have thoroughly read and understand the statements and conditions stated herein and agree to the terms of this Agreement, as noted by my)signature, as follows: |
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| Authorized Signature Date 5/4/22 |
| I, Kimberiy Chanian., the group leader/organizer, hereby certify that all users of the |
| City of Chandler, Community Services – Aquatics Division programs or facilities in my group have been made aware of this document. |
| Name of Organization: HUSD KIdS Club |
| Address: 2935 S. Recker Rd. |
| City, State, Zip: Gilbert AZ 85295 CHANDLER |
| Contact Name: Kim Ohcnich arizona |
| Contact Phone Number: 480 279 7173 |
| Contact Email Address: Kimberly, Ohgolan CHUSD. arg. |

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1/23/2020