

Town of Winterville
Parks & Recreation Department
2936 Church Street
PO Box 1459
Winterville, NC 28590



Participant Name(s)

Program(s)

1. _____
2. _____
3. _____
4. _____

WAIVER OF LIABILITY AND DISCLAIMER

I, the candidate for a position on a Winterville Parks and Recreation team or program, hereby give my approval to participate in any and all league/program activities, including transportation to and from the activities. I know that participation in this activity may result in serious injuries and protective equipment does not prevent all injuries to players, and do hereby waive, release, absolve, indemnify and agree to hold harmless Winterville Parks and Recreation, members, the organizers, instructors, sponsors, participants, and persons transporting me to and from activities for any claim arising or any injury to me whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance. I agree to return upon request the uniform and other equipment issued to me in as good condition as when received except for normal wear and tear. I also hereby give permission to the Town of Winterville to use photographs of the participants for the promotion of the Department recreation programs and events.

Participant Signature

Date

EMERGENCY MEDICAL AUTHORIZATION

I, the participant, hereby authorize the managers, coaches, instructors, or Department Staff acting in the capacity of activity supervisor's/vehicle drivers, as my Agents, to consent to medical, surgical or dental examination and/or treatment. In case of emergency I hereby authorize treatment and/or care by any qualified, licensed physician who is available.

Participant Signature

Date