2021 SAAA Waiver Form

Swimmer's ivan	ne:				(Middle Initial)
DOB:	(Last) Age:	M/F_	(First)	Team:	(Middle Initial)
Parent Phone:			Parent P	hone:	
Emergency Cor	ntact Name:				Phone:
Please list all l	known medical c	ondition	s on the	back of this	form.
Arizona Aquatic or parents actin medical, surgica	Association (SA/g in the capacity oal, and/or dental e	AA), you of superv examinati	do hereby risors as A on, treatn	/ authorize th Agents for you nent, etc. In th	participate in the Southern e coaches, assistant coaches, ur team or SAAA, to consent to be case of an emergency, you er at any hospital or care facility.
Arizona Aquation potentially danguate not only from you others, the conditions	c Association (SA/ perous sport that rour own swimmer' ditions of equipments of to assume the	AA), you nay resul s actions ent, facilit	are hereb It in serious inactions ies, or oth	y acknowledgus injury, or expose, but from actions to	participate in the Southern ging that swimming is a ven death. These may result tion/inaction/negligence of used for training or competition. vim team and give consent to
individual, here Southern Arizor representatives same parties ha	by give our conse na Aquatic Associ , from any claim a armless from any	nt and ag ation (SA arising ou claim aris	gree to rel AAA) and It of injury sing out o	ease, indemrits Member To the named finjuries or co	or guardian(s) of said nify, and hold harmless the eams, its coaches, officials, and d individual. We also hold these onditions caused by or religious or philosophical
or other team a and forever rele each of their off claims including including but no damages, whet	ctivities, you volure ease and hold hare icers, directors, a g for personal injust of limited to claims	ntarily ass mless the gents, en ries, deat s of neglig nown, for	sume all re Souther apployees, th, diseas gence and reseen, or	isks associate on Arizona Aqu or other repr e or property I give up any unforeseen,	ompetition, meetings, training, ed with exposure to Covid-19 uatic Association (SAAA), and esentatives from any liability or losses, or any other loss, claims you may have to seek in connection with exposure, e league.
:(Parent/	Guardian Signatu	re)			 (Date)