

YMCA of Greater Providence Waiver and Release From Liability

First	MI	Last Name	Birthdate	Month	Day	Year
(Your name o	r your par	ent's name if you're und	der 18)			
Address						
City		State	Zip	Phone		
Emergency C	ontact (Na	ame)	ı	Phone		
Participant First	MI	Last Name		Birthdate Month	Day	Year
and/or particle Providence (" the age of 18 I understand age of 18) from equipment look the YMCA, an activities at odamages aris of 18) may suto assume full forever release and employee causes of activities at odamages aris and employee causes of activities are included by the support of th	ipation in a YMCA"), I YMCA"), I of that, in common time to cated ther d that we ur own rising from pustain in o l responsion, presenting in a docated that we will gen Law WHEREOF, 20	nnection with this YMCA time will enter onto the e, and will participate in hereby agree that we wk. I further understand tersonal injuries that I (ar about the YMCA premibility for any such injuries that get and all liability, claiment or future, arising ther dition to, and not in lieuws Section 7-6-9, as the the undersigned execution.	events sponsored and for my child and for my child and for my child and for specific and/or specific and/or specific and for and my children as ses or as a result and my children as ses or damages the officers, directors, demands, damagerom. The wait of, the exemption and for any children and specific a	I by the YM Idren and/or will use the porting even isses and end of any success, trustees, ages, righter and relemented from liab mended from the land of the land of the land of the land relemented from the land of the lan	CA of Gror wards, if e facilities the spongage in iable for ds, if und hactivitiur and fur, agents, s of acticase from ility granm time t	eater if under funder the es and sored by all such any er the age es. I agree illy and servants, on, or liability ted to o time.
Guardian if a	minor (Ur	or Parent/Legal der 18 Years of Age) or ted, on behalf of each o				