



GREATER WATERBURY YMCA

Guest Waiver

GUEST INFORMATION ONLY

First Name: _____ Last Name: _____ Suffix (Sr., Jr.): _____
Date of Birth: _____ Gender: _____ Race: _____
Address: _____
City: _____ State: _____ Zip code: _____
Home Phone: _____ Cell Phone: _____
Email: _____ Going to? _____

In case of an emergency the Waterbury YMCA will have to contact someone to inform them of your status. Please put your Emergency contacts First & Last Name as well as their phone number.

Emergency Contact First & Last Name: _____
Emergency Contact Phone Number: _____

AGREEMENT: LIABILITY WAIVER & CODE OF CONDUCT

I _____, understand and agree on behalf of myself, others on my membership and/or guests, to abide by the following policies and procedures in consideration for my membership to the YMCA. The YMCA reserves the right to deny access, reject, or cancel any application or membership of any person. This includes, but is not limited to, any person known to have been accused or convicted of any crime involving child abuse, sexual abuse or is a registered sex offender. By signing this form, you certify that neither you nor anyone on your membership has been accused or convicted of a criminal offense listed above. I understand that the Greater Waterbury YMCA employees, agents, and assigns, have the right to videotape or photograph me and use my picture, voice, quotes, silhouette, and other reproductions of my physical likeness (as the same may appear in any still camera photography and/or motion picture film/video), in and in connection with the advertising, promoting and communications for YMCA purposes only. I understand that while exercise is instrumental to maintaining good health, use of the facilities at the YMCA incurs some potential risk. In consideration for being allowed to participate in activities and to use the equipment and facilities at the YMCA, I assume the risk of all such usage and further agree to hold harmless the YMCA and its staff members from any and all claim suits, losses, or related causes of action for damages, including but not limited to, such claims that may result from my injury or death, accidental or otherwise, during, or arising in any way from exercising or using the facilities at the YMCA. I understand the YMCA is not responsible for lost or stolen items. I further understand the YMCA has the right to revise policies and procedures without notice.

Code of Conduct:

- Members shall act appropriately always when in the YMCA's facility or participating in its programs.
- Members are responsible for their personal comfort and safety.
- Members should report inappropriate behavior to a staff person or the Building Supervisor on duty.
- Members shall not cause disruption to membership or programs.
- Members and/or guests shall not use the premises and/or services of the Greater Waterbury YMCA for any form of compensation.
- Members and/or guests shall identify themselves to staff when asked.

I have read and understand the liability waiver and code of conduct.

Signature of Applicant: _____ Date: _____

OFFICE USE ONLY:

GUEST OF: _____ Entered to Daxko: _____ Staff Received: _____ Date: _____
SORV: _____ Picture? _____ Staff Processed: _____ Date: _____
COVID-19 Waiver: _____ NOTES: _____

Adult Participant Release & Waiver of Liability and Indemnity Agreement

PLEASE READ CAREFULLY. THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS AND IS LEGALLY BINDING. BY SIGNING THIS AGREEMENT, YOU ARE RELEASING THE GREATER WATERBURY YMCA FROM ALL LIABILITY AND FOREVER GIVING UP ANY CLAIMS THEREFOR.

Assumption of Risk

I acknowledge and agree that any use of The Greater Waterbury YMCA facilities, services, equipment and premises (Facilities) and any participation in The Greater Waterbury YMCA programs and activities (?Programs?) comes with inherent risks including, but in no way limited to: (1) moderate and severe personal injury, (2) property damage, (3) disability, (4) death, and (5) sickness or disease. I voluntarily accept and assume full responsibility for these risks as well as any and all other risks of the use of Facilities and participation in Programs. I agree that I have full knowledge of the nature and extent of all such risks and am not relying on all such risks being described in this document.

Waiver, Release, Indemnification & Covenant Not to Sue

In consideration of the use of Facilities and participation in Programs I, the undersigned, agree that The Greater Waterbury YMCA, its officers, directors, agents, employees, volunteers, insurers and representatives (?Releasees?) will not be liable for any personal injury, property damage, disability, death, sickness or disease incurred by myself, my family members, dependents, or guests, including minors, however occurring including, but not limited to, the negligence of Releasees. I understand that I will be solely responsible for any loss or damage, including personal injury, property damage, disability, death, sickness or disease sustained from the use of Facilities and participation in Programs.

I further agree, on behalf of myself and any and all legal successors and proxies, to release and **HEREBY DO RELEASE, WAIVE AND COVENANT NOT TO SUE** Releasees from any causes of action, claims, suits, liabilities or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which I and any and all legal successors and proxies may have, now or in the future, against Releasees on account of personal injury, property damage, disability, death, sickness, diseases or accident of any kind, arising out of or in any way related to the use of Facilities or participation in Programs, whether that participation is supervised or unsupervised; however, the injury or damage occurs, including, but not limited to the negligence of Releasees.

In further consideration of the use of Facilities and participation in Programs, I agree to **INDEMNIFY AND HOLD HARMLESS** Releasees from any and all causes of action, claims, demands, losses, suits, liabilities or costs of any nature whatsoever, including claims of negligence, arising out of or in any way related to the use of Facilities and participation in Programs by myself, my family members, dependents or guests, including any minors.

Member Name (Print Clearly)

Member Signature

Date

Member Name (Print Clearly)

Member Signature

Date