

WAIVER, RELEASE, HOLD HARMLESS, AND AGREEMENT NOT TO SUE

I,	(FULL NAME), fully understand that my participation in
activities at and/or use of the City of Mission Viejo r personal injury, death, communicable diseases, illnesse	recreation and tennis centers/facilities exposes me to the risk of es, viruses, or property damage/loss. I hereby acknowledge that I hese facilities/centers and agree to assume any such risks.
and volunteers for any injury, death or damage to or lo participation in activities at and/or use of these center negligence of the City of Mission Viejo or any other pa	ty of Mission Viejo and its officers, officials, employees, agents, oss of personal property arising out of, or in connection with, my s/facilities from whatever cause, including the active or passive articipants/patrons. The parties to this AGREEMENT understand of from any act or omission of "gross negligence," as that term is
myself and my child(ren), my heirs, administrators, ex City of Mission Viejo and its officers, officials, employ	activities at and/or use these facilities/centers, I hereby agree, for ecutors and assigns, that I shall indemnify and hold harmless the rees, agents, volunteers, contractors and contract instructors from it of or in connection with our participation in activities at and/or
•	OLD HARMLESS AND AGREEMENT NOT TO SUE AND WARE THAT IT IS A FULL RELEASE OF ALL LIABILITY
X	age 18) Date
DEC	CLARATION
further declare that I shall indemnify and hold has employees, agents, and volunteers from and against of Minor's participation in activities at and/or use of	(Full name of Parent/Legal Guardian), declare under California that I am the parent or legal guardian of Minor. I rmless the City of Mission Viejo and its officers, officials, any and all Claims resulting from, incident to, or arising out of these facilities/centers, any and all risks assumed by Minor ovenants, and/or representations made by me herein and/or in
By:	Email:
Signature of Parent/Legal Guardian	Date Of Birth:
	Phone Number:
Name:	Address:
Printed Name of Parent/Legal Guardian	