The University of Texas at Austin
Longhorn Aquatics

SINGLE SESSION MINOR-Release and Indemnification Form

PARTICIPANT: (Name and Address)
_____
_____
_____ _____
_____

INSTITUTION: The University of Texas at Austin
LOCATION: Lee and Joe Jamail Texas Swimming Center
ACTIVITY: Longhorn Aquatics - Single training session

I am the Parent/Guardian of the above-named Participant who is under eighteen years of age and I am fully competent to sign this Agreement.

I give permission for Participant to participate in the above-referenced Activity. I acknowledge that the nature of the Activity may expose Participant to hazards or risks that may result in Participant's illness, personal injury or death and I understand and appreciate that nature of such hazards and risks.

In consideration of Participant being permitted to participate in the Activity, I hereby accept all risk to Participant's health and of his/her injury or death that may result from such participation and I hereby release the above named Institution, its governing board, officers, employees and representatives from any and all liability to Participant, Participant's personal representatives, estate, heirs, next of kin, and assigns for any and all claims and causes of action for loss of or damage to Participant's property and for any and all illness or injury to Participant's person, including his/her death, that may result from or occur during Participant's participation in the Activity, whether caused by negligence of the Institution, its governing board, officers, employees, or representatives, or otherwise. I further agree to indemnify and hold harmless the Institution and its governing board, officers, employees, and representatives from liability for the injury or death of any person(s) and damage to property that may result from Participants' negligent or intentional act or omission while participating in the described Activity.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR PARTICIPANT'S INJURY OR DEATH OR DAMAGE TO PARTICIPANT'S PROPERTY THAT OCCURS WHILE PARTICIPATING IN THE DESCRIBED ACTIVITY AND IT OBLIGATES ME TO INDEMNIFY THE PARTIES NAMED FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED BY PARTICIPANT'S NEGLIGENT OR INTENTIONAL ACT OR OMISSION.

_____ _____
Signature of Parent/Guardian Date Signature of Participant Date

A $5 fee is charged for each Longhorn Aquatics (TXLA) Training Session or $8.00 for 2 sessions in the same day. Please remit checks to The University of Texas at Austin. Cash payments may be made at the TSC Front Desk. Participant has reviewed and agrees to abide by the Lee and Joe Jamail Texas Swimming Center Rules and Regulations, as well as any requests of UT staff members. Participants must present a valid National Governing Body (NGB) registration card and photo ID in order to participate. This membership is non-refundable and non-transferable.

_____
Coach Authorization Date

_____
Witness: TSC Entrance Monitor Date

	Cash Paid	**Date**
TOTAL	$	

NGB #: _____

Type of ID:_____

ID #:_____