POOL PARTICIPATION AGREEMENT
BROWERVILLE PUBLIC SCHOOL
BROWERVILLE, MINNESOTA

I agree that all activities undertaken by my child/children who participate in activities in the Browerville Area Swimming Pool are undertaken by him/her at his/her sole risk and that ISD #787 of Browerville Shall not be liable for any claim, demands, injuries, damages, actions, or causes of action whatsoever to me or my son/daughter or to his/her property due to the omissions of ISD # 787, its servants, agents, or employees arising out of or connected with my son's daughter's participation at the pool and that on behalf of myself and son/daughter I expressly forever release ISD # 787, its servants, agents, or employees, from all such claims, demands, injuries, damages, actions, or causes whatsoever.

DATED _____ _____
(Signature of Parent/Guardian)

_____
(Address)

_____ _____ _____
(Home Phone) (Work Phone) (Cell Phone)

Person to be contacted in case of an emergency if information is different than above

_____
(Name)

_____
(Address)

_____ _____ _____
(Home Phone) (Work Phone) (Cell Phone)

I agree to be a pool participant subject to the conditions set forth in this agreement

_____
(Signature of participant if 18 or older)

Names of Children	Age	Names of Children	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____