



The following waiver applies to these activities: **2023 WINTER Private Lessons**

I/we, the undersigned, for myself and/or as parent(s) or legal guardian(s) of \_\_\_\_\_, a minor, hereby acknowledge my wish to participate in, and/or my consent to said minor's participation in, the foregoing Town of Brookline Park and Recreation Program.

In signing this consent and release, I/we do forever RELEASE, acquit, discharge and covenant to hold harmless the Town of Brookline, and its successors, departments, officials, officers, employees, servants and volunteers, from any and all actions, causes of action, claims, demands, damages, costs, loss of services, expenses and compensation on account of, or in any way arising from, directly or indirectly, all known and unknown personal injuries or property damages which I/we may now or hereafter have for myself and/or as the parent(s) or legal guardian(s) of said minor, and also all claims and rights of action or damages which said minor may have or hereafter may acquire as a result of his/her participation in the Town of Brookline Park and Recreation Program.

FURTHERMORE, I/we hereby agree to indemnify the Town of Brookline and its successors, departments, officials, officers, employees, servants and volunteers from and against any and all claims for damages, compensation, attorney's fees or otherwise arising out of or resulting from my and/or said minor's participation in the Town of Brookline Park and Recreation Program.

\_\_\_\_\_  
Printed Name of Program Participant

\_\_\_\_\_  
Participant's Date of Birth

\_\_\_\_\_  
Signature of Program Participant (if participant is 18 or over)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Legal Guardian (if participant is under 18)

\_\_\_\_\_  
Date

Please complete and return to:

Attn: Amanda Wong  
Evelyn Kirrane Aquatics Center  
60 Tappan Street, Brookline, MA 02445