

City of Clinton Parks & Recreation

Child or Children's Name: _____

R E L E A S E

I, _____, who resides at

(Physical Address)

(City)

(County)

Tennessee, for and in sole consideration of the City of Clinton, Tennessee and its Recreation Department, as a participant in the (activity) Swimming Programs do hereby release, and forever discharge the City of Clinton, Tennessee, it's Recreation Department, its employees and agents, of any and all claims, demands, rights and causes of action of whatsoever kind and nature arising from and by reason of any and all known and unknown, foreseen and unforeseen, bodily and personal injuries and the consequences thereof resulting from my participation in the activity conducted through the Recreation Department, of the City of Clinton, Tennessee.

I do hereby individually further covenant with the said City that I and my heirs, executors, assigns and transferees, will never at any future time sue the said City for or on account of any claim for damages arising out of my participation in the activity.

This the _____ day of _____, 20 _____

(Signature) _____

Phone Number: (___ ___) ___ ___ - ___ ___

I have been informed of and understand the City of Clinton's policy of a \$20.00 fee on all checks returned for insufficient funds. _____

(Your Initials)