Woodlake Swim Club Board of Directors June 15, 2015

For Office Use: Keep on file for current season.

GUEST WAIVER

WOODLAKE SWIM CLUB ~ 1445 LOCHBRAE ROAD ~ SACRAMENTO 95815 ~ 925-5555

| GUEST NAME | · · · · · · · · · · · · · · · · · · · | |
|--|---|--|
| ADDRESS | 'RINT FULL NAME | |
| CITY | STATE | _ PHONE |
| and hereby, for myse and all rights and clai or its agents, or any a use of the facilities of Club harmless. I furth | elf, my heirs, exe ims for all damag and all injuries wh f The Woodlake S er agree to pay fo ny lawsuit, which | ub, Inc., I agree to use the facilities at my own risk ecutors and administrators waive and release any es I might have against The Woodlake Swim Club nich may be suffered by me in connection with the Swim Club and agree to hold The Woodlake Swim or any and all defendant's legal costs and attorney's a I or my family may bring against The Woodlake or members. |
| Guest signature _ | _ | uardian must sign for guests under 18 yrs old. contact number for persons under 18: #) |
| As the sponsoring membhis/her actions while a gu | | nd by signing below, I realize I am responsible for lake Swim Club, Inc. |
| Member signature | · | _ |
| Print last name | | |
| Today's Date | | |
| • | the posted Gues | to determine payment. Unless payment is st Rules, a member's guest(s) pays \$2.00 per day grounds. |
| | or use the availa | m. Pay at the window during office hours when an able envelopes to insert money <u>and</u> the GUEST e. |
| Have fun! | | |