



TRY OUT- MINOR

Release and Indemnification Form

PARTICIPANT’S NAME:

CONTACT INFO:

Phone Number

Date: _____

E-mail Address

SPORT: (please check one) _____ Swimming _____ Diving _____ Water Polo

I am the Parent/Guardian of the above-named Participant who is under 18 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 my 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 Participant’s 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 MY 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 THE PARTICIPANT’S NEGLIGENT OR INTENTIONAL ACT OR OMISSION.

Signature of Parent/ Guardian

Printed Name

Date



TEAM ASSIGNMENT:

Longhorn Aquatics Swimming	
	National/Elite (NE)
	Senior (SR)
	Age-Group Elite (AGE)
	Senior Longhorn (SRLH)
	Longhorn (LH)
	Junior Longhorn (JRLH)

Longhorn Aquatics Diving	
	Podium Longhorn
	Elite Longhorn
	Intermediate Longhorn
	Coach's Select (Talent ID)
	Future Longhorn

Longhorn Aquatics Water Polo	
	Longhorn Novice
	Longhorn White
	Longhorn Orange

Coach's Signature

Date