

SEASPAR
DISCOVER ABILITIES
ACHIEVE POTENTIAL
REALIZE DREAMS

4500 BELMONT ROAD DOWNERS GROVE, IL 60515 630.960.7600 F-630.960.7601 SEASPAR.ORG

Non-Traditional Volunteer Waiver

Submit completed form to SEASPAR.

Name	
	City
	Cell Phone
Emergency Contact	Phone
	ay be useful to authorized medical personnel in the case of
an emergency:	
	to be, a child sex offender?
SEASPAR is committed to conducting it safety of all in high regard. SEASPAR continually and instructions that are designed to protect their there is an inherent risk of injury when choosing the You are solely responsible for determining if you contemplated by this agreement. It is always advice ently suffered an illness, injury or impairment, Recreational activities are intended to consider the second involved. Despite careful and proper presponsible of those involved. Despite careful and proper presponseen. Depending on the particular activity, considered in a risk of serious injury when participated foreseen. Depending on the particular activity, considered in a result of the particular activity. In this regard, it waiver and Release Please read this form carefully and be a expressly assuming the risk and legal liability and you might sustain as a result of participating in an (including transportation services and vehicle open a recognize and acknowledge that there agree to assume the full risk of any and all injurier result of said participation. I further agree to waiv of participating in this activity against SEASPAR, I understand that SEASPAR carries not in the event of an emergency, I understated that SEASPAR carries not in the event of an emergency, I understated that I will be responsible for participation agree that I will be responsible for participation and agree that I will be responsible for participation and agree that I will be responsible for participation and agree that I will be responsible for participation and fully understand the above read and fully understand	Vaiver & Release inportant Information is recreation programs and activities in a safe manner and holds the vistrives to reduce such risks and insists that all follow safety rules is safety. However, these individuals in activities must recognize that to participate in recreational activities. are physically fit and/or adequately skilled for the activities isable, especially if you are pregnant, disabled in any way, or have to consult a physician before undertaking any physical activity. Warning of Risk isallenge and engage the physical, mental, and emotional resources paration, instruction, medical advice, conditioning, and equipment, ting in any recreational activity. All hazards and dangers cannot be intain risks, dangers, and injuries may exist due to inclement oning, carelessness, horseplay, unsportsmanlike conduct, premises equate supervision, instruction, or officiating, and other risks is impossible for SEASPAR to guarantee absolute safety. of All Claims And Assumption of Risk ware that in signing up and participating in this activity, you will be divaiving and releasing all claims for injuries, damages or loss which my and all activities connected with and associated with this activity erations, when provided). are certain risks of physical injury in this activity, and I voluntarily is, damages or loss, regardless of severity, that I may sustain as a e and relinquish all claims I may have (or accrue to me) as a result including its officials, agents, volunteers, and employees. medical insurance and I must cover any medical costs incurred. and and authorize SEASPAR staff and officials to secure from any onnel any treatment deemed necessary for immediate care for yment of any and all medical services rendered. Over important information, warning of risk, assumption of risk and this or via fax, my on-line or facsimile signature shall substitute for
Signature	Date
Parent Signature(If minor volunteer)	Date