



OFFICE ONLY
Mbr # _____
Staff Initials : _____
Date: _____

ADULT PARTICIPANT FACILITY RELEASE FORM

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Work Phone: (_____) _____

Birth date: _____ Age: _____ Email: _____ Male Female

THE FOLLOWING INFORMATION WILL BE USED TO BEST SERVE THE PARTICIPANT

Are there any physical/ developmental needs that may affect activity? Yes No

If yes, please explain:

Any medications taken on a regular basis? Yes No

1: _____ for _____

2: _____ for _____

3: _____ for _____

4: _____ for _____

Emergency Contact

Name: _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

PLEASE TURN OVER AND SIGN WAIVER

YMCA OF SAN DIEGO COUNTY MEMBER/PARTICIPANT ETHNICITY TRACKING TOOL (OPTIONAL):
This voluntary information will be used for statistical purposes in order to enable our YMCA to provide quality services to our community members.

White/Caucasian Black/African American Hispanic/Latino Native American Asian/Pacific Islander
 Arab/Middle Eastern Multi Cultural Other _____

PRIMARY LANGUAGE: English Spanish Other _____

**BRANCH RELEASE/WAIVER FOR YMCA ADULTS
COMUNICADO DE SUCURSALES – REGLAS / RENUNCIA PARA LOS ADULTOS DE LA YMCA**

In consideration of being permitted to enter any branch of the YMCA of San Diego County (“YMCA”) for observation, use of facilities and/or equipment, or participation in any program, I hereby:

En consideración de tener el permiso de entrar a cualquier sucursal de la YMCA del condado de San Diego (YMCA) para observación, uso de los servicios y-o equipo, o la participación en cualquier programa, yo declaro:

1. Acknowledge that (i) I have read this document, (ii) I have inspected the YMCA facilities and equipment, (iii) I accept them as being safe and reasonably suited for the purposes intended, and (iv) I voluntarily sign this document.

1. Reconozco que (i) he leído este documento, (ii) he inspeccionado las instalaciones y los equipos de la YMCA, (iii) los acepto como seguros y razonablemente adecuados para los propósitos con que fueron hechos, y (iv) voluntariamente firmo este documento.

2. Release the YMCA, its directors, officers, employees, and volunteers (collectively “Releasees”) from all liability to me for any loss or damage to property or injury or death to person, whether caused by Releasees or otherwise and while I am in or near any YMCA branch.

2. Libero a la YMCA, sus directores, oficiales, empleados y voluntarios (colectivamente “liberados”) de toda responsabilidad por cualquier pérdida o daño a la propiedad o lesión o muerte a mi persona cuando sea causado por los “liberados” y esté cerca o en cualquier sucursal de la YMCA.

3. I agree not to sue Releasees for any loss, damage, injury or death described above and I will indemnify and hold harmless Releasees and each of them from any loss, liability, damage or cost they may incur due to my presence in, upon or near the YMCA branch; whether caused by the negligence of the Releasees or otherwise.

3. Convengo en no demandar a los “liberados” por cualquier pérdida, responsabilidad, daño o muerte descrita anteriormente e indemnizaré sin daño a los “liberados” y cada uno de ellos de cualquier pérdida, responsabilidad, daño o costo en el que ellos pudieran incurrir debido a mi presencia dentro, sobre o cerca de la sucursal de la YMCA; ya sea causado por negligencia de los “liberados” o de otra manera.

4. I assume full responsibility for, and risk of, bodily injury, death or property damage due to the negligence of Releasees or otherwise.

4. Asumo toda la responsabilidad por cualquier riesgo, herida, muerte o daño a la propiedad debido a la negligencia de los “liberados” o de otra manera.

I intend this document to be as broad and inclusive as is permitted by the laws of the State of California; if any portion hereof is held invalid, I agree that the balance shall continue in full legal force and effect.

Comprendo que este documento es tan amplio e incluye todo lo que permiten las leyes del Estado de California; si cualquier parte fuera considerada inválida, estoy de acuerdo que el resto continúe con todo su efecto y fuerza legal

Dated/Fecha:

Signature of Applicant/ Firma Del Solicitante

Nombre Por Escrito

PHOTOGRAPHIC WAIVER/CONSENT

I, _____ give my permission to the YMCA of San Diego County (YMCA) to use my picture or other likeness, or a picture or other likeness of any of my children, specifically, _____, in the YMCA’s general publicity and campaign materials.