



The City of Grove City Parks & Recreation Department

4035 Broadway, Grove City, Ohio 43123-0427
614-277-3050



Richard L. "Ike" Stage
Mayor

Adult Sports Waiver

As the parent of a minor participant (age 17 and up) in the _____ Adult Sports league, I recognize and acknowledge that there are certain risks and physical injury involved. I agree and assume the full risk of any injuries, damage or loss which my child may sustain as a result of participating in the league.

With the extent to be legally bound, I hereby, for myself, all heirs, executors, administrators, and assigns, do hereby waive and relinquish all claims my child may have as a result and hold harmless and defend, the City of Grove City and Department of Parks and Recreation, and its officers, agents, servants and employees, from any and all claims resulting from injuries, damage or loss which my child may have or which may accrue to me on account of my child's participation of this league.

Participant's Name: _____ Birthdate: _____

Date: _____ Signature of Parent or Guardian: _____

OFFICE COPY



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COACH'S COPY