

**WASHINGTON WETSKINS WATER POLO, INC.**  
**Participant Release of Liability and Assumption of Risk**

The sport of water polo is a physical contact sport and participation can – and occasionally does – result in injury. Although most injuries are minor, serious and even life-threatening injuries can occur.

I \_\_\_\_\_ desire to participate in water polo practices and competitions (“Water Polo”) as a member of Washington Wetskins Water Polo, Inc. (“Wetskins”). I am at least 18 years old. I agree that I will become a member of USA Water Polo (<http://www.usawaterpolo.org>) and maintain a membership while participating in Water Polo with the Wetskins.

I acknowledge that, due to the nature of the game, participation in Water Polo may result in injuries or damage, including but not limited to bodily injuries, the loss of or damage to personal property, and death. I and my estate (including my parents, heirs, executors, administrators and assigns) do hereby release, indemnify and hold harmless the Wetskins (individually and collectively), the Wetskins Board of Directors, other participants playing Water Polo with the Wetskins, and their employees, agents, successors and assigns, singularly and collectively, from and against any claims, cost, liabilities, expenses, or judgments, including but not limited to attorney's fees and costs, past, present or future, known or unknown, including those arising from negligence, for any injury, harm, loss, inconvenience or any other damage of any kind whatsoever, that may result from or be connected in any way to my participation in Water Polo with the Wetskins.

The law of the District of Columbia will apply to this Agreement, without regard to principles of conflicts of law. A court of the District of Columbia will be the forum for any actions arising in connection with this Agreement. This Agreement represents the entire agreement between me and the Wetskins. No actions or statements by the Wetskins contrary to the terms of this Agreement will constitute a waiver of the terms of this Agreement.

**I HAVE READ AND UNDERSTAND THE ABOVE PROVISIONS AND AGREE TO BE BOUND TO THE TERMS, AS INDICATED BY MY SIGNATURE BELOW.**

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date

E-mail Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Mailing Address (optional):

*MEDIA RELEASE FORM*

MEDIA/PHOTO WAIVER: I recognize that photographs and video films are occasionally taken during Washington Wetskins Water Polo, Inc. related events and that these pictures may be used for training, publications, promotions, or for marketing purposes. I hereby grant Washington Wetskins Water Polo, Inc. a worldwide, perpetual, royalty-free license to use for any reason whatsoever my picture or likeness taken during my participation in Washington Wetskins Water Polo, Inc. events.

Name (please print legibly):

Signature:

Date: