## **RCSL City Meet permission/waiver**

(parent	) gives full permission and consent for their child
Meet including practice, swim meets, diving	civities of the Rocket City Swim League (RCSL) City g, and meetings. I understand that the RSCL City child has chosen to participate in the RCSL City
thru medical professionals of their own choi	oyees, or Huntsville Natatorium Pool LifeGuards ce, to obtain any medical emergency care that may n the course of activities or practice of the RCSL
	medical bills, including, but not limited to charges legal which your child may incur by reason of Meet.
AND/or, action against the City of Huntsvill which may arise by reason of injury to my c Coaches, Teachers, employees, LifeGuards,	tinst RCSL and its Coaches, Teachers, & employees, le, and/or the Rocket City Swim League (RCSL) hild because of participation. I also agree that and other members of, RCSL, or the City of d from any and all claims of liability to me or my shild because of such participation.
	policy # this coverage for the tenure of his/her participation
with RCSL activities.	
	urance, I agree & understand that I will be fully s that may incur by reason of participation in such
6. I understand that RCSL are non-profit or for my child.	ganizations and do not offer any type of insurance
Signature of Parent/Guardian	Date
Address:	
Hama Dhana #	