

Rental Waiver Warminster Branch

Name _____

Address _____

DOB _____ Phone Number _____

Email Address _____

Member or Non-Member

Renters Name/Organization _____

In consideration of my child's participation in the activities at YMCA of Bucks County, I do hereby hold YMCA of Bucks County free from any liability, including their respective officers, employees and members. This includes, but is not limited to, their own negligence. I do hereby --for myself, heirs, executors and administrators -- waive, release and forever discharge any and all rights and claims for damages or injuries which my child/I may incur or may arise in connection with participation in any of the activities within the facility. I, the undersigned, have read, understand and agree to the above.

I acknowledge and agree to comply with the Membership Safety Protocols as shared on the website of YMCA of Bucks County. I also acknowledge and agree to comply with the Membership Handbook; also shared on the website of YMCA of Bucks County.

My consent to the terms is assumed if I do not return this form.

Signature: _____ Date: _____

PHOTO CONSENT (please initial below): I do hereby grant permission for video/photographs to be taken by the staff that may be used for publicity and advertising purposes.

_____ Yes

_____ No

YMCA of Bucks County
Warminster Aquatics Center
624 York Road, Warminster, PA 18974
267.387.9622