

THE CROSSINGS SWIM TEAM

2022 Sponsor Family / Non-Resident Liability Waiver

We are excited to be able to offer participation to Non-Residents in 2022 on The Crossings Swim Team.

By signing below, I understand that my child is participating on The Crossings Swim Team (the "Team") – a Crossings community activity. I agree that I will not enter myself, or my child, in this program unless we are medically able and understand the hazards that go along with swim team. I assume all risk, on behalf of my child, associated with participating on swim team. Having read and signed this registration form, I hereby release The Crossings HOA; The Crossings Swim Team coaches, and volunteers; the Just Swim Charlotte swim league and its participating team facilities, from any and all claims and/or liabilities of any kind that may arise while my child is participating in any of its programs.

I acknowledge the Crossings Pool Rules and agree to abide by all rules and regulations set forth by the Crossings HOA. I understand The Crossings Guest Policy as it applies to me as a Non-Resident; that my Sponsor Family is my host family for all Team functions. If my Sponsor Family is unable to be at a Team event on a particular day, then the Team admin will assume sponsor responsibilities for the event on that given date. I understand that I must accompany my child at all times to all Team events. If I am unable to accompany my child to Team events, per The Crossings HOA rules, my child is not allowed to participate in Team events on that date. Outside of Team, my family is subject to the regular The Crossings Guest Policy, the same as all Non-Residents.

I further understand that because I am a guest of a Crossings family, my participation is subject to my Sponsor Family's standing with the Crossings HOA. If my Sponsor Family has their pool privileges suspended and/or terminated for any reason, I understand that will directly affect my family's ability to participate on the Team.

(Name of Non-Resident Family)

(Date)

(Signature of Non-Resident Family)

(Name of Sponsor Family)

(Date)

(Signature of Sponsor Family)