

# 2009 BARRACUDA SWIM TEAM REGISTRATION FORM

## Release of Liability

In consideration of the opportunity for my children,

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to participate in this recreational program, I release the village of Mazomanie and the Barracuda swim team, their employees, officers and agents from all liability for any and all loss resulting from damage to their person or property, including death, which may result from participation in this recreational program, either inside or outside the village. I further understand that 395.52 of Wisconsin State Statutes defines the limitation of the village as far all liability goes as it relates to recreational activities. Accidents are to be reported to the village at once, however, an accident reported is not intended to imply a liability on the part of the village or swim team, their employees, officers, or agents. I authorize emergency medical treatment for myself/son/daughter by any licensed emergency health care provider. I have read and fully understand this form.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

## Photo Release

I hereby grant the Mazomanie Barracudas Swim Team permission to use my and/or my child's likeness in photograph(s)/video in any and all of its publications (including the Cuda Bites and team website) and in any and all other media, whether now known or hereafter existing, controlled by the Mazomanie Barracudas, in perpetuity, and for other use by the Swim Team. I will make no monetary or other claim against Mazomanie Barracudas for the use of the photograph(s)/video.

I hereby grant permission to use the likeness of myself and my children

I DO NOT grant permission to use the likeness of myself and my children

Please return to:  
Bob Craig  
Mazomanie Barracudas  
10712 Howard Trail  
Mazomanie, WI 53560