



## RELEASE AND HOLD HARMLESS AGREEMENT

**ACTIVITIES INVOLVING THE USE OF FACILITIES OWNED AND MAINTAINED BY  
WATERFORD LAKES COMMUNITY ASSOCIATION, INC.**

I am adult of at least 18 years of age and desire to participate and/or have my child/children participate in recreational activities involving the use of facilities owned and maintained by Waterford Lakes Community Association, Inc., a Florida non-profit corporation (hereinafter referred to as "WLCA").

I understand and agree that in exchange for WLCA's grant of permission to me and/or my child/children to utilize WLCA's recreational facilities, I/we hereby waive, release and pledge to hold harmless WLCA (together with its agents, employees, officers and directors) from any claims for injuries (including any injuries resulting in death), losses and /or damages connected in any way with my and /or my child's children's use of the WLCA's recreational facilities. I/we understand and agree that this release extends to any claims of injuries (including any injuries resulting in death), losses and/or damages proximately caused by any negligent or grossly negligent action or inaction of WLCA, its agents, employees, officers and/or directors.

I further understand and agree that neither WLCA nor its agents, employees, officers and/or directors are responsible for any personal property loss or theft which may occur at any time while I/we are participating in recreational activities involving the use of facilities owned and maintained by WLCA, and that I/we waive and release any and all claims against WLCA, its agents, employees, officers and/or directors for any such loss may occur.

I/we further acknowledge that I/we have been given the opportunity to consult with legal counsel prior to signing this release and hold harmless agreement, and represent to WLCA that I/we fully understand and appreciate the rights which are being relinquished and waived hereby.

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Signature of Participant

Date

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Printed Name

Team Name if Applicable

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Signature of Parent or Guardian

Date

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Printed Name

Address

