WAIVER OF LIABILITY AND EXPRESS ASSUMPTION OF RISK
(PLEASE READ CAREFULLY)

Covered Event: _____

I, the undersigned named Participant, acknowledge that I am choosing to participate in this Event, and that I am not entitled to any compensation, benefit or insurance coverage from any Event promoter, sponsor, organizer, or coordinator, nor will I make any such claim.

I understand and agree that neither Guam Aquatics/Guam Swimming Federation, the Guam National Olympic Committee, the Event Organizing Committee, nor any of their respective members, directors, officers, employees, agents or assigns (collectively referred to as "Released Parties") shall be held liable or responsible in any way for any injury, death or other damages to me or my family, estate, heirs, or assigns that may occur as a result of my voluntary participation in the Event, or as a result of product liability or negligence, whether passive or active, of any party, including other volunteers and the Released Parties in connection with the Event.

In consideration for the privilege of being allowed to participate in the Event, I personally assume all risks of any harm, injury, or death that may befall me as a participant in connection with the Event, whether foreseen or unforeseen.

I am over the age of eighteen (18) years old and am legally competent to sign this Waiver of Liability and Express Assumption of Risk, or I have acquired the written consent of my parent or guardian as indicated below. I understand that the terms herein are material and contractual and not a mere recital. This instrument is legally binding, and I have signed this document of my own free act. If any of clauses or provisions herein are held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not affect the validity of the remaining clauses and provisions, which shall continue to be enforceable.

I HEREBY RELEASE AND HOLD HARMLESS THE RELEASED PARTIES FROM ANY CLAIM OR LAWSUIT FOR PERSONAL INJURY, PROPERTY DAMAGE, OR WRONGFUL DEATH, BY ME, MY FAMILY, ESTATE, HEIRS, OR ASSIGNS, ARISING OUT OF MY PARTICIPATION IN THE EVENT, INCLUDING CLAIMS BASED ON THE NEGLIGENCE OF OTHER PARTICIPANTS OR THE RELEASED PARTIES, WHETHER PASSIVE OR ACTIVE. I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS RELEASE AND AM VOLUNTARILY ASSUMING THE RISK.

_____	_____	_____
Participant's Name	Signature of Participant	Date

IF PARTICIPANT IS UNDER 18, A PARENT OR LEGAL GUARDIAN MUST SIGN:
I am the parent or legal guardian of the above Participant and he/she has my consent and permission to participate in the Event. I have read and do agree to the provisions stated above for myself and for the Participant. Further, I also understand and agree that I, and not the Released Parties or the sponsors, coordinators, and organizers of the Event, am responsible for any injury, damages or harm of any nature whatsoever that may result from the personal actions or omissions of the Participant.

_____	_____	_____
Parent or Guardian's Name	Signature of Parent or Guardian	Date