

# OC LIFEGUARDS

## Volunteer Performance Accident Waiver

Location of Test: Dana Strands Test Date: \_\_\_\_\_

Candidate Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (zip)

Phone: ( ) \_\_\_\_\_

### Contact person in case of Emergency:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

## WAIVER

**WHEREAS**, OC Lifeguards has prescribed minimum qualifications for the classification of seasonal lifeguard which include skills in swimming and running, and

**WHEREAS**, OC Lifeguards has specified that I must demonstrate my physical strength, endurance, agility, and swimming skills and has scheduled the above place for such demonstration, and

**WHEREAS**, the facilities have been provided to me for such demonstration, I certify that I have the ability and experience to perform this demonstration without risk to myself or to others.

**I DO HEREBY AGREE**, to assume all risks attendant upon the carrying out of the performance of this demonstration and to save and hold harmless from liability OC Lifeguards and/or any of its agents, servants, or employees, by reason of any accident, injury, or damage to persons or property that I may suffer while participating in the demonstration, and to assume responsibility for any property damage or injury to any person caused by me while participating in the said demonstration.

Candidate Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Additionally, if participant is under 18 years old,

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship: \_\_\_\_\_