

Pool Address
6125 Larson Ave
Kansas City, MO 64133

Woodson Estates Swimming Pool
Release of Liability Waiver 2022

WEHA Mailing Address
P.O. Box 16582
Raytown, MO 64133

Release of Liability, Waiver of Claims, Assumption of Risk, and Indemnity Agreement

PLEASE READ CAREFULLY. BY SIGNING THIS DOCUMENT, YOU CHOOSE TO WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE.

To: The Woodson Estates Homes Association (Owner of Property, Releasees)

I and/or my family wishes to swim at the Woodson Estates Homes Association Pool facilities. By entering and using the pool area, I and/or my family recognizes and fully understands certain things, including:

- Even though a life guard is on duty, I and/or my family are responsible for our use of the pool and are responsible for using the pool in a manner in line with safety guidelines and all rules, verbal and written.
- My family and/or my use of the pool facilities involves certain risks, including but not limited to:
 1. The risk of injury resulting from possible malfunction of the pool equipment;
 2. The risk of injuries resulting from tripping or falling over obstacles in the pool area;
 3. The risk of injuries resulting from divers and swimmers colliding;
 4. The risk of other injuries resulting from participating in any action in the pool.
- My family and/or I recognize and fully understand that the above list is not a complete or exhaustive list of all possible risks; the list only provides examples of types of risks that I am assuming.

In exchange for the Owner allowing my family and I to utilize the pool and area during designated pool hours, I hereby agree to the conditions below. I and my family fully intend and choose to give up our legal rights, as stated below:

1. TO WAIVE ANY AND ALL CLAIMS that I have or may have in the future against the Owner, its directors, officers, employees, agents, or representatives (hereinafter referred to as the "Releasees") relating to my and/or my family's use of the pool and pool area;
2. TO RELEASE THE RELEASEES from any and all liability for any loss, damage, injury, expense, or other cost that I may suffer, my family may suffer, or that my next of kin may suffer in connection with my and/or my family's use of the Releasees pool or pool area to any cause whatsoever, INCLUDING NEGLIGENCE ON THE PART OF THE RELEASEES;
3. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability to property, or personal injury to, any third party, resulting from the use of the pool or pool area;
4. That I am over the age of 18 and that I am responsible and will adhere to all the rules of the property, as well as ensure that all of my family members also adhere to all the rules of the property;
5. That this Waiver, Release, and Agreement is fully effective and shall be effective and binding upon me and my family, as well as my heirs, next of kin, executors, administrators, and assigns, or anyone else authorized to act on my and/or my family's behalf or on behalf of my and/or my family's estate.

I and my family have read and understood this document. I am aware that by signing this document, we are waiving certain legal rights that I or my family may have against the Releasees, and I fully agree to do so. All adults over the age of 18 in my household who are listed in the application for Pool Membership have signed below and fully agree to the above.

Signature (Adult)

Printed Name

Date

Signature (Adult)

Printed Name

Date

Signature (Adult)

Printed Name

Date

Signature (Adult)

Printed Name

Date