

## 2023 Summer Youth Golf Clinic

### Waiver of Liability

I, the undersigned parent and/or legal guardian of the child listed below have on this day of \_\_\_\_\_, 2023, given my permission for the child to participate fully in the Youth Golf Clinic at Monoosnock Country Club.

I hereby certify that the child listed is in good health, has no known infectious or contagious diseases or conditions, and is physically able to participate in all golf instruction activities offered during the clinic.

Further, I understand that normal risks are inherent in the sports and recreational activities of children and acknowledge that such risks may be involved during this golf clinic. I assume any and all responsibility and risk(s) of danger associated with, arising from, due to, or in connection with such participation, whether or not resulting from the negligent acts and/or omissions of any of the Monoosnock CC instructional staff. I further acknowledge and agree, for and on behalf of myself and the child listed, that the child shall participate in the clinic activities at our risk, and Monoosnock Country Club, or any of its respective officers, directors, employees, or agents shall have any liability whatsoever for any injury, damage, or loss to any of our person or property. I hereby agree, for and on behalf of the child listed, to indemnify and hold Monoosnock Country Club, or any of its respective officers, directors, employees, or agents harmless from and against any and all losses, costs, claims, injuries, demands, fines, actions or damages of any kind arising from our participation in the clinic activities.

I hereby represent that I have fully read and understand the terms of this Waiver of Liability, and I am executing the same voluntarily and of my own accord. I expressly agree that this Waiver of Liability is intended to be as broad and inclusive as permitted by the laws of the State of Massachusetts.

**Printed Name of Child:** \_\_\_\_\_

**Printed Name of Parent/Legal Guardian:** \_\_\_\_\_

**Signature of Parent/Legal Guardian:** \_\_\_\_\_

**Emergency Contact #:** \_\_\_\_\_