



**2012 WAIVER FORM**

I understand and agree that this waiver constitutes a full and complete release of liability and by signing this document I hereby discharge, Flannagan's and its owners, agents, servants, employees, assigned sponsors, and advertisers from any and all loss, claims for loss or responsibility for injury to me which may result from the use of the premises and/or equipment owned by Flannagan's. I further understand and agree that all persons in and around the volleyball court and the swimming pool will use caution while participating and viewing said activities. I have also read and understand all rules associated with Flannagan's Volleyball and EllyBay swimming pool.

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

Print Name: \_\_\_\_\_

Birth date: \_\_\_\_\_ Phone: \_\_\_\_\_

Valid Driver's License I.D. #: \_\_\_\_\_ Issuing State: \_\_\_\_\_

Email Address: \_\_\_\_\_

**\*ALL WAIVERS MUST BE SIGNED AND SUBMITTED WITH A PHOTO I.D. IN PERSON AT FLANNAGAN'S.**