

MOLE CREEK SWIMMING POOL

DISCLAIMER AND ACTIVITY WAIVER

DISCLAIMER

Persons using this pool do so at their own risk. This pool is operated by the Mole Creek Progress Association of 48 Pioneer Dr, Mole Creek TAS 7304, Australia.

Supervision Requirements

- Children under 14 must be accompanied by a parent or guardian over 18 years
- Ages 0-5: Stay within arm's reach
- Ages 6-10: Stay close and maintain constant visual contact
- Ages 11-14: Maintain visual contact

Pool Rules

- No alcohol, smoking, or glass permitted
- No running, swearing, bombing, dunking, spitting, or pushing swimmers
- Do not use facilities under the influence of alcohol or drugs
- Visitors not complying may be removed from the facility

It is a condition of admission that the Mole Creek Progress Association accepts no liability for any losses, injuries, or death which may occur at this facility, however caused. By entering, you accept that you do so at your own risk and waive any legal rights you may have against the Association.

ACTIVITY WAIVER

In consideration of being allowed to participate in swimming at the Mole Creek Swimming Pool (the "**Activity**"), the Participant agrees to the following:

1. Acknowledgment of Risks

The Participant acknowledges that swimming involves inherent risks including drowning, slips and falls on wet surfaces, diving injuries, collisions, exposure to pool chemicals, waterborne illnesses, and other injuries that cannot be eliminated regardless of care taken.

2. Release of Liability

The Participant releases and forever discharges the Mole Creek Progress Association, its directors, officers, employees, agents, and representatives from all claims, actions, and demands for injury to person or property, including death, arising from participation in the Activity, even if caused by the Association's negligence.

3. Fitness to Participate

The Participant acknowledges they have no physical limitations, medical ailments, or disabilities that would prevent safe participation. If required, the Participant will obtain medical clearance.

4. Voluntary Participation

The Participant acknowledges they have had sufficient time to read this waiver, have been encouraged to seek legal advice, fully understand the risks and claims being waived, are executing this waiver freely and voluntarily, and are forever prevented from suing the Association for any property loss or personal injury sustained while participating in the Activity.

5. Governing Law

This waiver is governed by the laws of Tasmania, Australia.

PARTICIPANT ACKNOWLEDGMENT

I acknowledge that I have read this waiver, understand its terms, and sign it voluntarily as my own free act and deed.

Participant Name: _____ Participant Signature: _____ Date: _____
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If Participant is under 18 years of age, a parent/guardian must sign on their behalf:

Minor Name / Parent or Guardian Name: _____ Parent/Guardian Signature: _____ Relationship to Minor: _____ Date: _____
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