

Thornton's Pool Waiver

Permission Slip & Waiver/Release

Student's Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

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

\_\_\_\_\_

Emergency Phone #: \_\_\_\_\_

I hereby grant permission for my child/self to participate in swimming and/or outdoor activities at the home of Micky & Jane Thornton, located at 4962 Hwy 59 West, Covington, TN 38019. I understand that these activities involve a certain degree of risk, including injury to person, of which I am fully knowledgeable and which I hereby voluntarily assume for my child/self. I further release and hold harmless Micky, Jane Thornton & family from any and all liability in connection with the use of their pool, including any injury that may occur while at their home.

I further grant permission for my child/self to swim and certify that my child/self can swim. In the event that my child/self can not swim I will provide them/self with all necessary flotation devices for use while in or near the water.

\_\_\_\_\_  
Parent/ Guardian Signature

\_\_\_\_\_  
Date