LESLIE BEACH CLUB
SWIM | TENNIS | COMMUNITY

**Swim at Your Own Risk Liability Release**

I, _____ (name) REQUEST PERMISSION to use the Leslie Beach pool and pool deck (together referred to as the "Pool") at a time when there will be NO LIFEGUARDS present. I understand that there are other times when the Pool will be open, and lifeguards and others will be present. Nevertheless, I request to use the Pool when no lifeguards will be at the Pool. I understand that as condition of my use of the Pool when no lifeguards are present, and potentially no other person will be present, I execute and agree to this Release and my Family and I will abide by its terms.

I promise that (i) I am physically fit and capable of swimming without injury or danger to myself or others; (ii) I have sufficient swimming expertise to swim without injury or danger to myself or others, even in water over my head; and (iii) I have read all rules of Leslie Beach Club and will obey them. I understand that swimming and other activities at the Pool are inherently dangerous activities, the risks of which include but are not limited to, death and serious bodily injury, due to weather, conditions of the Pool, falls, heart attack or stroke, or other infirmity, the conduct of other swimmers, and the risk that no one may be present to assist me if I have an injury. Leslie Beach recommends that I not use the Pool when no one else is present. I am aware of all of the risks and warnings and, with that information, I execute this Agreement. I AFFIRM THAT MY USE OF THE POOL IS VOLUNTARY AND AT MY OWN RISK.

I ASSUME ALL RISKS, on my behalf and on behalf of my spouse, children, parents and siblings and all other potential heirs ("my Family"). On my behalf and my Family's behalf, I hereby forever WAIVE, RELEASE AND DISCHARGE any and all rights and claims of any kind whatsoever, whether monetary or otherwise compensatory or punitive, that I may have or my Family may have or will ever have against the Leslie Beach Club, Leslie Beach Club, Inc., its officers, directors, employees, agents, and suppliers.

As another condition of using the Pool, I AGREE that (i) I will use the Pool only during times when swim-at-your-own-risk is allowed, and specifically, I will not use the Pool at night; (ii) I will not allow anyone under the age of 21 years old, including my own children, or anyone who has not signed a Release, to enter the Pool or its surrounding deck (unless the person requesting entry is a lifeguard retained by Leslie Beach Club), and (iii) I will immediately and securely lock the Pool's gate upon my exit.

Executed and agreed this _____ day of _____ 20_____.

| | | |
|---|---|---|
| _____ | _____ | _____ |
| Signature | Date | LBC Key Card Number |
| _____ | _____ | _____ |
| Print Name | Emergency Telephone# | Emergency Contact Name |

Return completed form to LeslieBeachNews@gmail.com.

**The Leslie Beach Club**
**2539 Leslie Dr.**
**Atlanta, GA 30345**