

**Kehukee
Camp, Conference, Retreat Center**

Swimming Pool Release Form

We _____ hereby request the use of the swimming pool
(Name of Church)

on _____.
(Dates)

ALL POOL ACTIVITIES will require one of the options below:

1. Lifeguard with current certification
2. An adult who has current CPR training and certification

This person's name is _____.

We hereby accept full responsibility for our group and will not hold the Association liable for any injuries or accidents. Any damage occurring to any part of the pool, fence, bathhouse, etc. while in my care will be paid by _____.
(Name of Church)

Adult signing this form on behalf of PBA member church must be 21 years of age or older.

(Print Name)

(Signature)

Approved by:

(Print Name)

(Signature)