



**North Canton
Community Building YMCA
Non-Member Release Form**

Last Name _____ **First Name** _____

Date of Birth _____

Parent Name _____

Address _____

City _____ **State** _____ **Zip** _____

Phone Number _____

Email Address _____

I hereby accept all responsibility for, and assume the risk of any injury or damage to my person or dependent children which might arise directly or indirectly as a result, and or participation in a YMCA of Central Stark County program. I hereby expressly release, discharge and hold harmless from any liability whatsoever the YMCA, the various branches and subdivisions thereof, and all employees and volunteers in their capacities as representatives of the YMCA, expressly including, but not limited to, the Board of Trustees of the YMCA, except for injuries caused intentionally, or by willful misconduct. I certify that I am familiar with the contents of this release, that I have read and understand the same, and that it is my intention by signing this release that the same be binding not only on me, but my heirs, administrators, executors, successors, and assigns.

Participant's Signature (parent or guardian if a child)

Date