



**Call 911 for emergencies:**  
Building address is 1760 Golfview Drive  
Blue Bell, PA 19422

## POOL WAIVER AND RELEASE

In consideration for being permitted to use the pool facilities owned and operated by the Blue Bell Country Club Community Association®, and intending to be legally bound hereby, each of the undersigned agrees to the following:

1. I acknowledge that prior to using any of the pools, if I have any concern about the condition or safety of the pool; and/or if I believe anything is unsafe, I will immediately stop and get out of pool. If at any time during use, I feel that the equipment is unsafe or I feel unsure as to the safety of the activity I am engaging in, I will immediately cease to participate.
2. I acknowledge and fully understand that I will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from my own actions but from the actions or inactions or negligence of others and that there may be other risks not known or not reasonably foreseeable at the time of such activity. I agree to assume all the foregoing risks (and any others that may come from use of the Pool) and accept personal responsibility for the consequences of any injury, permanent disability or death.
3. I agree to release and hold harmless the Association, its officers, directors, employees, management staff, agents, contractors, vendors, and each of their successors and assigns from any liability, claim, suit, action demand, damage or cost or expense of any nature arising out of any personal injury and/or property damage that I or my guests might suffer as a result of any participation by me, my guests, or other participants on any property owned, leased or rented by the Association. I acknowledge that by signing this Waiver and Release, I am waiving certain legal rights, including, without limitation, the right to sue the parties named above arising out of any personal injury and/or property damage that I, or my guests, may suffer, directly or indirectly, while using the Pool Facilities.
4. I acknowledge that I am entering into this Waiver and Release of my own free will and without duress on behalf of myself, my family members, and any guests that I may bring to the Association property, activities and events. I further acknowledge that it is my responsibility to make sure that any guests which I bring to the Pool are aware of this Waiver and Release and agree to its terms prior to their use.

THE UNIT OWNER / RESIDENT HAS READ THE ABOVE WAIVER AND RELEASE AND UNDERSTANDS THAT HE / SHE HAS GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGNS IT VOLUNTARILY FOR THE UNIT.

Sign: \_\_\_\_\_

Print name: \_\_\_\_\_

Sign: \_\_\_\_\_

Print name: \_\_\_\_\_

Unit address: \_\_\_\_\_

*The master R&R for Community Center applies to all facilities inside the building.*