

Danbury Aquatics Swim Lesson Registration



DANBURY
LOCAL SCHOOLS
Aquatics

Participant Information

Participant Name: _____ AGE: _____ M / F

Parent/Guardian Name if under 18: _____ Birthdate: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Personal Phone: _____ Alternate Phone: _____

Email Address: _____

Medical Information:

Does the participant have any medical conditions or medications the staff should be aware of?
(Example: allergies, diabetes, seizures, ADHD, learning disability, etc.)

Initial _____ To my knowledge, this participant is medically qualified to participate in Danbury Local Schools Aquatics Swim Lessons.

Parent/Child Class	Level 2	Private Lessons
		Based on Instructor
Preschool		Availability
		Monday
	Level 3	Tuesday
		Wednesday
Level 1		Thursday
		Saturday
	Stroke Fundamentals	

**Please sign Hold Harmless Agreement and Initial Photography & First Aid Release on back of page.
Parent's signature required for all participants less than 18 years of age**

Danbury Local Schools Aquatics USE ONLY

Jun _____

Dec _____

Jul _____

Jan _____

Aug _____

Feb _____

Sep _____

Mar _____

Oct _____

Apr _____

Nov _____

May _____

Emergency Contact: _____

Relationship: _____

Emergency Contact Phone: _____

Alternate Emergency Contact: _____

Relationship: _____

Alternate Emergency Contact Phone: _____

**WAIVER OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT
Danbury Local Schools Aquatics**

FOR OPEN RECREATION SWIMMING OR SWIM LESSONS AT DANBURY LOCAL SCHOOLS AQUATICS DEPARTMENT.

In consideration of the privilege of using the Danbury Local Schools Aquatics Pool for recreational swimming and swim lessons at 9451 E. Harbor Rd, Lakeside-Marblehead, OH 43440, and further recognizing the voluntary nature of my participation in this event, I/we, the parents/guardian of the named child do hereby give approval to the participation in any and all activities. I/we assume all the risks and hazards incidental to the activities and do further hereby release, absolve, identify and hold harmless, hereby promise to waive for myself, my guardians, heirs, executor, administrators, legal representatives and any other persons on my behalf, any and all rights and claims for damages, demands, and any other actions whatsoever, including those attributable to simple negligence, which I/we may have against any of the following persons or entities: Danbury Locals Schools; any and all individuals employed by the Danbury Local Schools, including but not limited to Superintendent, Principals, Athletics Administrators, Coaches, or Aquatics Personnel; in both their official and personal capacities; any medical support personnel assigned thereto; and these persons' or entities' representatives, successors, and assigns, for any injuries and/or death resulting from my participation in the activities comprising the aforesaid event; as well as any use by me of any equipment or facilities in conjunction with and furtherance of such participation by me. I VERIFY THAT I HAVE FULL KNOWLEDGE OF THE RISKS ASSOCIATED WITH USING THE POOLS, TO INCLUDE THE RISKS OF SLIPPING AND FALLING ON WET SURFACES, OR DROWNING WHILE SWIMMING IN THE POOL. I EXPRESSLY, KNOWINGLY, AND VOLUNTARILY ASSUME THE RISKS INVOLVED IN THE ACTIVITIES AND AGREE TO HOLD DANBURY LOCAL SCHOOLS HARMLESS FOR ANY RESULTING INJURY AND/OR DEATH. I understand that this waiver of liability/assumption of risk agreement shall remain in effect until notice of cancellation is received by the Aquatics Department Management. I understand that, should I decline to execute this agreement, I will not be permitted to enter the Danbury Local Schools Aquatics Pool.

Initial _____ I hereby consent that photographs of me or my child taken by Danbury Local Schools Aquatics may be used by Danbury Local Schools for the purpose of illustration, advertising, or publication in any manner.

Initial _____ I hereby give permission for my child to be administered first aid and CPR/AED treatment as deemed necessary by qualified staff while participating in Danbury Locals Schools Aquatics Swim Lessons.

I understand ALL LESSONS/CLASSES ARE NON-REFUNDABLE and rescheduling may be offered on a case by case basis. I understand if Danbury Local Schools Aquatics is closed due to inclement weather or an equipment malfunction, they reserve the right to NOT make up missed programs due to staffing and limited pool availability

Signature

Date

If under 18 - Parent/Guardian signature on behalf of: _____

(Name of Participant/Minor)

Signature of Witness
(Witness is Danbury Aquatics Representative)

Date