



SWIM LESSON REGISTRATION FORM

PARTICIPANT'S INFORMATION

NAME:

ADDRESS:

CITY:

STATE:

EMAIL:

DATE OF BIRTH:

GENDER:

GRADE:

PHONE NUMBER:

SCHOOL/ORGANIZATION/EMPLOYER:

INJURIES/MEDICATIONS/OTHER NECESSARY INFORMATION:

PARENT/GUARDIAN'S INFORMATION (if under 18)

NAME:

PHONE NUMBER:

ALTERNATE PERSON ALLOWED TO PICK-UP PARTICIPANT (if under 18):

ALTERNATE'S PHONE NUMBER:

PROGRAMMING

Please check one:

Needs Parent in Water Comfortable Moderate Ability Advanced

Please Select Time:

5:00pm or 6:00pm

Optional: The USA Swimming Foundation requires age, gender, and race data upon completion of distribution of grant funding. Any information will be greatly appreciated.

Please Circle Nationality/Race:

African American Asian American Indian Alaskan Native Pacific Islander Hispanic Caucasian

Other: _____

Respectfully Decline

Liability – I recognize that participation in The HUB's activities or programs may expose me to some risk of injury, illness or death. I assume all liability and agree to hold The HUB harmless from any claims for damage to any property or injury to persons which may occur through participation in any activity or program at The HUB. Code of Conduct – The HUB prohibits inappropriate behavior and conduct. This includes, but is not limited to, profanity or abusive language or attire, smoking, use of alcohol or drugs, the removal of HUB property and criminal conduct of any type. Such inappropriate behavior or conducts is unacceptable and The HUB consequently retains the right to deny membership to its applicants and to revoke a membership of any current member or participant at its sole discretion. Photo/Talent Release – I hereby irrevocably release, consent and allow The HUB and its agent to use my photograph/likeness/voice as it pertains to my participation with The HUB, in any manner for promotional efforts without exception for any reimbursement in connection with its use.

I acknowledge by signing and dating below that I have read the waiver and all program information above.

PARTICIPANT OR PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

Thursdays October 3 - December 5 2019