

# SWIM PROGRAMS 2013

## REGISTRATION FORM

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

CELL: \_\_\_\_\_ PARENT: \_\_\_\_\_

CELL: \_\_\_\_\_ PARENT: \_\_\_\_\_

POOL MEMBER ? YES OR NO

INSURANCE CARRIER \_\_\_\_\_ # \_\_\_\_\_

### RELEASE TO HOLD HARMLESS AGREEMENT

Please read this form carefully and be aware that in signing up and participating in this program(s), you will be waiving and releasing all claims for injuries, you might sustain arising out of this program (including transportation services, when provided) for you and your family members and/or anyone on your membership form. As a participant in the program(s), I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of injuries, damages or loss which I may sustain as a result of participating in any and all activities with or associated with such program. I agree to waive and relinquish all claims I may have as a result of participating in the program(s) against the EDCO Park Authority and/or Evans City Borough and its officers, agents, servants and employees. I do here by release and discharge the EDCO Park Authority and/or Evans City Borough and its officers, agents, servants, and employees from any and all claims from injuries, damage or loss which I may have or which may accrue to me on account of my participation in the program(s). I further agree to indemnify and hold harmless and defend the EDCO Park Authority and/or Evans City Borough and its officers, agents, servants, and employees from any and all claims resulting from injuries, damages and losses sustained by me and arising out of, connected with or in associated with any and all activities of the program(s).

I have read and fully understand the above program details and waiver Release of all claims for me and my family members and/or anyone on my membership form. Waivers MUST be signed by participant(s) legal guardian. The EDCO Park Authority and/or Evans City Borough will consider facsimile signatures as original.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Students Name: \_\_\_\_\_

## Registering for

**Group Lessons**      *Class Date:* \_\_\_\_\_  
*Level:* \_\_\_\_\_      *Time:* **morning or evening**

Date Paid: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Employee int. \_\_\_\_\_

**Swim Camp**      *Class Date:* \_\_\_\_\_

Date Paid: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Employee int. \_\_\_\_\_

**Water Aerobics**      *Class Date:* \_\_\_\_\_

Date Paid: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Employee int. \_\_\_\_\_

**Private Lessons**      *Instructor:* \_\_\_\_\_

Class Dates Scheduled

1<sup>st</sup> : \_\_\_\_\_ 2<sup>nd</sup> : \_\_\_\_\_

3<sup>rd</sup> : \_\_\_\_\_ 4<sup>th</sup> : \_\_\_\_\_ 5<sup>th</sup> : \_\_\_\_\_

Date Paid: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Employee int. \_\_\_\_\_

**Group Lessons**      *Class Date:* \_\_\_\_\_  
*Level:* \_\_\_\_\_      *Time:* **morning or evening**

Date Paid: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Employee int. \_\_\_\_\_

**Swim Camp**      *Class Date:* \_\_\_\_\_

Date Paid: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Employee int. \_\_\_\_\_

**Water Aerobics**      *Class Date:* \_\_\_\_\_

Date Paid: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Employee int. \_\_\_\_\_

**Private Lessons**      *Instructor:* \_\_\_\_\_

Class Dates Scheduled

1<sup>st</sup> : \_\_\_\_\_ 2<sup>nd</sup> : \_\_\_\_\_

3<sup>rd</sup> : \_\_\_\_\_ 4<sup>th</sup> : \_\_\_\_\_ 5<sup>th</sup> : \_\_\_\_\_

Date Paid: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Employee int. \_\_\_\_\_