

Ragsdale YMCA Swim Lesson Registration Form Adult

SWIMMER INFORMATION

First Name: _____ Last Name: _____

Date of Birth: ____/____/____ Age: _____ Gender: _____

Address: _____ City: _____ State: ____ Zip: ____

PARENT / GUARDIAN INFORMATION

Stage: ____ Time: _____ Session: Sept. M/W Sept. T/TH Oct. M/W Oct. T/TH Nov. M/W Nov. T/TH

Saturday 8/22-9/26 Saturday 10/3-11/7 Saturday 11/14-12/19

Guardian #1 (person who will be contacted in case of class cancellation)

Name: _____ Relationship: _____

Preferred Phone: _____ Email: _____

Guardian #2 Name: _____ Relationship: _____

Preferred Phone: _____ Email: _____

IMPORTANT MEDICAL INFORMATION

Swim Lesson Policies

A minimum of three students must register to hold a class. Cancellations will be done before the session begins.

Classes are limited in space based on age and skill level.

All classes have prerequisites and the Y reserves the authority to move participants to different levels as they or we see appropriate. If space is not available in the necessary class a voucher will be issued for future registration.

Parents' must remain on the pool deck for any child under the age of 13 in swim lessons.

If the YMCA cancels a class during a regularly scheduled session we will make every effort to make up the class or issue a voucher.

Vouchers or make-up lessons are not given due to illness, injury, vacation, schedule conflict, ect.

In the event of thunder/lighting the pool will close and not re-open until 30 minutes after the last sight of lighting or sound of thunder.

In the event the pool is contaminated the Y pool will close until the water has been cleared and sanitized, this may result in the pool being closed for up to 24 hours.

Class schedules are subject to change.

Parent/Guardian/Participant Signature: _____ Date: _____



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Adult Participant Release & Waiver of Liability and Indemnity Agreement

PLEASE READ CAREFULLY. THIS DOCUMENT EFFECTS YOUR LEGAL RIGHTS AND IS LEGALLY BINDING. BY SIGNING THIS AGREEMENT YOU ARE RELEASING YMCA OF GREENSBORO, INC. FROM ALL LIABILITY AND FOREVER GIVING UP ANY CLAIMS THEREFORE

Assumption of Risk

I acknowledge and agree that any use of YMCA of Greensboro, Inc. facilities, services, equipment and premises ("Facilities") and any participation in YMCA of Greensboro, Inc. programs and activities ("Programs") comes with inherent risks including, but in no way limited to: (1) moderate and severe personal injury, (2) property damage, (3) disability, (4) death, and (5) sickness or disease. I voluntarily accept and assume full responsibility for these risks as well as any and all other risks of the use of Facilities and participation in Programs. I agree that I have full knowledge of the nature and extent of all such risks and am not relying on all such risks being described in this document.

Waiver, Release, Indemnification & Covenant Not to Sue

In consideration of the use of Facilities and participation in Programs I, the undersigned, agree that YMCA of Greensboro, Inc., its officers, directors, agents, employees, volunteers, insurers and representatives ("Releases") will not be liable for any personal injury, property damage, disability, death, sickness or disease incurred by myself, my family members, dependents, or guests, including minors, however occurring including, but not limited to the negligence of Releases. I understand that I will be solely responsible for any loss or damage, including personal injury, property damage, disability, death, sickness or disease sustained from the use of Facilities and participation in Programs.

I further agree, on behalf of myself and any and all legal successors and proxies, to release and **HEREBY DO RELEASE, WAIVE AND COVENANT NOT TO SUE** Releases from any causes of action, claims, suits, liabilities or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which I and any and all legal successors and proxies may have, now or in the future, against Releases on account of personal injury, property damage, disability, death, sickness, diseases or accident of any kind, arising out of or in any way related to the use of Facilities or participation in Programs, whether that participation is supervised or unsupervised, however the injury or damage occurs, including, but not limited to the negligence of Releases.

In further consideration of the use of Facilities and participation in Programs, I agree to **INDEMNIFY AND HOLD HARMLESS** Releases from any and all causes of action, claims, demands, losses, suits, liabilities or costs of any nature whatsoever, including claims of negligence, arising out of or in any way related to the use of Facilities and participation in Programs by myself, my family members, dependents or guests, including any minors.

Participant Signature: _____ Date: _____

Participant Legal Name (Print Clearly): _____ Member ID: _____

Participant D.O.B: _____ Email Address: _____