

SwimKids Swim School Waiver

All participants must have a signed waiver to be allowed to swim.

PARTICIPANT(S) INFORMATION

First Name/ MI/ Last Name: _____

First Name/ MI/ Last Name: _____

First Name/ MI/ Last Name: _____

A responsible adult must accompany children that cannot safely swim the width of our pool. Unless a parent or guardian is with their child in the water, all participants will be given a brief swim test to determine whether or not a lifejacket will be worn. SwimKids has life jackets on site to borrow.

All children who are under 3, regardless of level of potty training, or older children who are not fully potty trained, must be double-diapered, which means they need to wear a disposable swim diaper covered by a REUSABLE, snug-fitting swim diaper.

Please list any special needs, concerns or medical conditions:

PARENT(S)/GUARDIAN(S) NAME: _____

Address: _____

City, State Zip: _____

Home Phone Number: _____ Cell Phone Number: _____

E-mail : _____

SWIMKIDS RELEASE (Please Read and Sign Release Below)

EMERGENCY MEDICAL RELEASE: Should a medical emergency arise while my child is at SwimKids Swim School, I understand that reasonable effort will be made to contact me. If I cannot be reached, or if it is believed that my child's life or health may be adversely affected by the delay that an attempt to contact me would cause, I consent to the administration of medical treatment and/or surgical procedures deemed necessary by the medical doctor and/or medical facility, and I consent to the immediate administration of life sustaining measures deemed necessary under the circumstances.

PERMISSION TO PARTICIPATE/LEGAL RELEASE:

1. Except for conditions that I have disclosed to SwimKids Swim School, to the best of my knowledge there are no physical or other conditions which will interfere with my child's participation. Safety rules are enforced. While our first priority is your child's safety, we must inform you that swimming is not risk free. As a participant or as a parent or legal guardian of a participant in a SwimKids Swim School program, party, event, or open swim, I am fully aware that swimming can be strenuous, hazardous, and difficult. I acknowledge and freely accept the risks and hazards, including collisions, falls and risk of drowning, associated with the participation in swimming. I agree to hold SwimKids Swim Schools, SwimKids Swim School, Inc., DC Swim, Inc., DC Swim Loudoun, Inc., and iSwim, Inc., its officers and agents free and harmless for any injuries or damages arising by reason of participation in this program.

2. I have read and agree to the policies listed here. I understand that photographs/videos taken may be used by SwimKids Swim School.

Parent/Guardian Name (please print) _____

Parent/Guardian Signature: _____ Date: _____