

Hartington Swimming Lessons Consent and Liability Form

As parent(s)/guardian(s) of _____, I/we understand that we/I am the only person(s) who have legal custody concerning individuals listed above. I/we acknowledge that there are inherent risks of physical injury involved with swimming associated with the Hartington Swimming Lessons Program, and I/we, the undersigned, hereby voluntarily assume those risks.

Further, the undersigned in consideration for the individual(s) named above, will allow said individual(s) to participate in the Hartington Swimming Lessons Program, and do hereby fully release and discharge all person and entities connected in any way with said program, including but not limited to all management, instructors, the City of Hartington, and any volunteers.

In the case that your child may need medical treatment, please list any medical conditions, allergies, or medications that emergency personnel would need to know:

In case of a medical emergency, parent(s)/guardian(s) authorize the Hartington Swimming Pool and its representatives to take all reasonable steps to secure the health and safety of individuals with any said conditions listed above.

Parent(s)/guardian(s) certified that he/she is the rightful guardian of said individual(s) and understands that terms contained are herein contractual and not mere recitals.

Parent/Guardian Signature: _____ Date: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

In case of emergency where the parent/guardian is unavailable, alternative person(s) whom we should contact:

Name: _____ Contact Number: _____

Name: _____ Contact Number: _____

Level Enrolled: _____

Paid: _____

Membership #: _____