

FALL SESSION APPLICATION:

OCTOBER 16, 2023-JANUARY 12, 2024

- The child must be potty trained in any group or private lesson.
- Parents must stay on the premises during the lesson.
- In Parent-Tot lessons a waterproof swim diaper is required
- Abide by all facility's rules and regulations.
- Children must be supervised throughout the building.
- No Adult males in the Female locker Room or Adult Females in the Male Locker Room
- No children on Deck without an Instructor on site
- Not responsible for lost personal items.

CHOSE 1 (ONE) DAY AND 1 (ONE) GROUP AND SIGN:					
MONDAY:	GROUP-5:15	GROUP-5:50			
TUESDAY:	PRIVATE-5:15	GROUP-5:50			
WEDNESDAY:	GROUP-5:15	GROUP-5:50			
THURSDAY:	PRIVATE-5:15	GROUP-5:50			
FRIDAY:	GROUP-5:15	GROUP-5:50			
SATURDAY:	PARENT & TOT 9:3	0 AM GROUP-10):05		
***IF YOUR CHILD IS <u>6 AND OVER</u> AND CAN SWIM A 25 YD LAP UNASSISTED ASK ABOUT NRAC PRE-COMPETITIVE DEVELOPMENT PROGRAM (2 DAY Mon/Wed- 1 hour 6:30-7:30 PM and 3 DAY Mon/Wed/Thur. 1.5 hour 6:30-8 PM)					
SIGN:	Dat	e: Paid: \$;		
	Fall fee schedule:				
	Registration Fee: \$35.00 One-time per school year USA Swimming Registration 10% off the Second Child/10% OFF the Second Day				
	No Refunds after the Second Class				
	•	One Child-1 Day: \$			
		One Child-1 Day: \$			
	Parent & Tot fee:	1 Child/1 Parent: \$	245.00		
CHILDS NAME:		AGE:_			
CHILDS NAME:		AGE:_			
PARENTS NAME(S)					
CONTACT: CELL PHONE:EMAIL:					
ANY PHYSICAL LIMITATIONS:					

SEE WAIVER AND RELEASE OF LIABILITY FORM WITH MEDICAL INFO FORM ATTACHED

WAIVER AND RELEASE OF LIABILITY

Please read carefully before signing. This is a release and waiver of certain legal rights.

l,	, Parent of	, the enrolled participant(s)	
agree and understand t	hat swimming is a HAZARDOUS activity. I re	ecognize that risks are inherent in and around the	
aquatic environment, in	cluding but not limited to, paralyzing injur	ies and death. The participant (via Parent/Guardian	
permission) hereby agre	ees to participate in the NRAC Splash and S	wim Learn to Swim program, and hereby agrees to	
indemnify and hold har	mless its Coordinators, Instructors, and the	North Rockland Central School District from and	
against all liability, loss,	damages, claims or actions (including cost	s and attorney's fees) for bodily injury and/or	
property damage, to the	e extent permissible by law.		
The participant authoriz	es the swim program coordinators to treat	t or have the participant treated in any medical	
emergency while partic	pating in the <u>NRAC Splash and Swim Learn</u>	to Swim program. Further, the parent/guardian	
agrees to pay all costs a	ssociated with medical care and transporta	ation for the participant.	
I have noted at the bott	om of this form any medical/health proble	ms of which the staff should be aware.	
I HAVE CAREFULLY REAL	THE ABOVE LIABILITY RELEASE & BELOW	RULES OF THE PROGRAM AND SIGNED IT WITH FULL	
KNOWLEDGE OF ITS CO	NTENTS AND SIGNIFICANCE.		
Signed (Parent/Guardia (Fall/Winter/Spring)	n):	Date:	
Any medical/health pro	blems:		
Lice congrete charte if needed			

Use separate sheets if needed.