

STAR SWIM CLUB

Tel: 727-488-7963

Email: info@starswimclub.com

Web: www.starswimclub.com

ANNUAL MEMBERSHIP RENEWAL FORM

Please complete and return this form along with annual registration fee of \$40.00 to Star Swim Club for the 2021 year.

Student's Name: _____ Date of Birth: ____/____/____

Mother's Information

Name: _____ Occupation: _____ Work Phone: _____

Email: _____ Cell Phone: _____

Father's Information

Name: _____ Occupation: _____ Work Phone: _____

Email: _____ Cell Phone: _____

Address: _____ City: _____ Zip: _____

List any known health conditions, allergies, or serious injuries: _____

Rules, Regulations, and Liability Waiver

Full payment must be provided for each four-week session no later than the first lesson of that session. Make-ups for swim lessons missed for personal reasons—such as illness, scheduling conflicts, vacations, etc.—may be given at the sole discretion of Star Swim Club and only prior to the expiration of the four-week session during which the swim lesson was missed. No make-ups will be given after the four-week session during which the missed lesson occurred has ended. If a registered student will discontinue the swim lessons, Star Swim Club must be notified at least two weeks in advance. No refunds will be given for any unattended lessons.

I certify that the above-named child has been recently examined by a physician and is physically fit to attend swim lessons, and he or she does not have any contagious diseases. I certify that I have listed on this form all medical/health conditions of which Star Swim Club should be aware. I further certify that to the best of my knowledge the above-named child has not had cryptosporidiosis within the two weeks preceding the date of execution of this document. I hereby acknowledge my duty to Star Swim Club to promptly notify its instructors if the above-named child is diagnosed with cryptosporidiosis and to refrain from attending swim lessons for a period of at least two weeks after the symptoms have ceased.

I agree to the following rules: no eating one hour before the class, all children must be taken to the bathroom before the class, and swim diapers are required for all children three years and younger.

I agree and understand that swimming is a hazardous activity. I recognize that there are risks inherent in the sport of swimming, including but not limited to, paralyzing injuries and death.

I hereby agree to let my child participate in the swim lessons and hereby agree to indemnify and hold harmless Star Swim Club its coaches, officers, directors, agents and employees against any liability resulting from any injury that may occur to my child while participating in the swim lessons. I agree to indemnify Star Swim Club for any damages incurred arising from any claims, demand, action or cause of action by the participant.

I authorize any representative of Star Swim Club to have the above-named child treated in any medical emergency during his/her participation in the swim lessons. Further, I, as the parent/guardian of the participant, agree to pay all costs associated with such treatment including, but not limited, to medical care costs and transportation.

I have carefully read the above liability release and sign it with full knowledge and understanding of its contents and significance.

Signature of Parent or Legal Guardian: _____ Date: _____