



Nassau Swim Club Full Day Aquatics Registration Form

Child's Name:

Date of Birth:

Parent/Legal Guardian Name:

Address:

Home Phone:

Cell Phone:

Emergency Contact Person/Phone:

Pick-up Authorization: I give the Aquatics Program staff permission to release my child to the following people at the end of the day:

Name/relationship:

We will be unable to release your child to any person not listed above without advance notice to program staff.

Nassau Swim Club Aquatics Waiver: All children are expected to obey Pool Rules. The Full Day Aquatics Program is open to members only, and therefore the Nassau Swim Club Waiver applies to all program participants. (See Pool Information on the NSC website.)

I thereby release the staff and Nassau Swim Club from any and all manner of actions, suits, claims, damages, and demands on account of personal injury arising from my child's participation in the Nassau Swim Club Aquatics Program.

Parent's signature: _____ **Date:** _____

Photo Consent: We would like to take pictures of our various activities, to be used in promotional materials or on our website. I give my permission:

INITIAL HERE _____

Field Trips: The children in the full day aquatics program will take weekly walks during the Nature&Local History activities. I give my permission:

INITIAL HERE _____