PALOS VERDES BEACH AND ATHLETIC CLUB

CHILDREN'S SWIM LESSON REGISTRATION FORM

(Please Print)

Student's Last Name: _____ Student's First Name: _____

Address: _____ City: _____ Zip: _____

D.O.B: _____ Age: _____   Home Phone: _____

Parent: _____   Parent's Cell Phone: _____

Email Address: _____

             Session: _____   Level: _____   Time: _____

Payment Amount $100 ☐ $110 ☐ $120 ☐   ☐ Cash ☐ Check No: _____

EMERGENCY CONTACT: Please list the name and phone number of a relative, friend, neighbor or parent at work who may be contacted if we are unable to reach anyone at home.

Name: _____ Telephone: _____

SUMMER SWIM LESSON WAIVER AND RELEASE OF LIABILITY

In consideration of using the Palos Verdes Beach and Athletic Club (PVBAC) pool deck level only, the undersigned:

1. Agree prior to using the PVBAC facilities, you will inspect the facilities and equipment to be used, and if you believe anything is unsafe, you will immediately advise the management of PVBAC.

2. Acknowledge and fully understand that you will be engaging in activities that involve risk of injury, which may resolve in permanent disability or death, and in social and economic losses which might result not only from your actions or negligence of others, but from the condition of the premises. Further, there may be risks not known to PVBAC or not reasonably foreseeable at this time.

3. Assume all the foregoing risks and accept responsibility for any damages following and/or caused by such injury, permanent disability, or death.

4. Release, waive, discharge and convenient not to sue PVBAC, its affiliates, administrators, directors, members, agents, coaches, and other employees of PVBAC, and owners and lessors of the premises used to conduct the activities of PVBAC, all of which are here in after referred to as "Releasees", from demands, losses, or damage on account of injury, including, but not limited to, disability, death or damage caused or alleged to be caused in whole or in part by your acts or omissions, the negligence of the Releasees, or other guests of PVBAC or otherwise.

THE UNDERSIGNED HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT THEY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

STUDENT'S NAME: _____

(PRINT)

PARENT OR GUARDIAN: _____   _____

(PRINT)   **(SIGNATURE)**