



2010 "LEARN-TO-SWIM"
Boys and Girls Club Swim Lesson Program

WHO: Boys & Girls Club of Souhegan Valley - Camp Souhegan Participants
WHERE: Keyes Memorial Pool - Elm Street, Milford
WHEN: Monday-Thursday (Friday Rain Date)
(Schedule depends on age, level, and camp programming)
COST: \$12.50pp per week (Checks made payable to: Boys and Girls Club)

Description of "LEARN-TO-SWIM" Program

Swimming lessons are offered by age and ability level and are taught by American Red Cross certified water safety instructors. The Learn-To-Swim program provides instruction to help swimmers of all ages and abilities develop their swimming and water safety skills. They are designed to give students a positive learning experience. Swimming lessons include safety program, rules, and ability assessment. The Pool Program Manager reserves the right to transfer students to the proper class level. This swim lesson program does not provide swim lesson participants with an American Red Cross certificate of level completion. WEATHER always plays a factor in outdoor lessons! Our goal is to make every effort to conduct lessons at the pool; Fridays will be used for weather make-ups if necessary.

2010 RECREATION SWIMMING LESSONS

** One Form per Participant **

NAME: AGE: DOB:
Street Address Home Phone
Parent's Name Parent's Work Phone
Emergency Contact Name Address Phone
Description of swim ability

PLEASE READ AND SIGN BELOW:

I AM AWARE OF the hazards of the activity/sport and the risk of injury in this athletic program. I certify that I am in good physical condition and am able to safely participate in this physical activity/sport.

I ASSUME all risks and hazards incidental to such participation, including transportation to and from activities, and do hereby waive, release, indemnify and agree to hold harmless the Town Recreation Department, volunteers and staff, team or league sponsors from all liability for any and all loss or damage, and any claim arising out of injury to myself or property damage that might occur, whether caused by negligence of the Town, agents or employees, or during participation.

I HEREBY GIVE MY PERMISSION for my son/daughter to participate in the Milford Recreation Dept program. I am aware of the hazards of the activity/sport and the risk of injury in these athletic and active programs. I assume all risks and hazards incidental to such participation, including transportation to and from activities, and I do hereby waive, release indemnify, and agree to hold harmless the said Town of Milford, its volunteers, staff and all sponsors for all liability for any and all loss or damage, and any claim arising out of injury to my son/daughter or property damage that might occur, whether caused by negligence of the Town, agents or employees, or during participation. I authorize the MRD to reasonable use of any and all images and statements of/by/about the participant during any part of a MRD program for promotional purposes, including the internet.

IN CASE OF EMERGENCY, I hereby give my permission to the program staff and medical personnel selected by the Recreation Dept and staff, to act as my agent to apply simple first aid when necessary, or in the event of a more serious accident, to be transported to an emergency medical facility to receive emergency medical treatment. I also authorize the medical personnel to administer such treatment as is medically necessary and I authorize the hospital to undertake examination and emergency treatment, if warranted, on behalf of myself or my child. IN THE EVENT OF AN EMERGENCY, EVERY EFFORT WILL BE MADE TO CONTACT GUARDIAN.

PLEASE LIST ALL MEDICAL CONCERNS or instructions the staff should know regarding you and/or your child's health on a separate sheet (medications, allergies, behavior concerns, etc.)

Parent/Guardian's Signature: Date