



SWIMMING LESSONS REGISTRATION FORM

Please print clearly. Fill out form completely for prompt processing.

SIGN-UPS BEGIN: MARCH 23, 2010 TILL CLASSES ARE FULL
FEE: \$26.00 PER CHILD PER SESSION

Participant Name _____

Parent's Name _____

Address _____ **City** _____ **Zip** _____

Home Phone() _____ **Cell Phone**() _____

Emergency Name _____ **Emergency Phone**() _____

<i>Child's Name</i>	<i>Level</i>	<i>Age</i>	<i>Session #</i>	<i>Times of class</i>

Release of Liability

Please read this form carefully and be aware that in registering yourself or your minor child/ward for participation in the program(s), you will be waiving and releasing all claims for injuries you or your child/ward might sustain arising out of the program(s). I recognize and acknowledge that there are certain risks of physical injury to participants in the program(s) and I agree to assume the full risk of any such injuries, damages, or loss regardless of severity which I or my child/ward may sustain as a result of participating in any of the program(s). I hereby fully release and discharge the City of Hastings and its officers, agents, servants and employees from any and all claims resulting from injuries, damages and losses sustained by me or my child/ward, and arising out, connected with, or in any way associated with activities of any of the programs.

Signature: _____ **Date:** _____

ONLINE REGISTRATION

Teams may register their team on our website at www.cityofhastings.org/parks