



## Parental/Legal Guardian Release For Student Participation in EduSports Summer Enrichment Swimming Program

Student's Name \_\_\_\_\_  
First Last Middle

Parent/Legal Guardian's Name: \_\_\_\_\_  
First Last Middle

Student's Date of Birth: \_\_\_\_\_ Gender: (circle one) Male Female

Student's Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent/Legal Guardian Contract #: Home ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_

I understand that my child's participation in a swimming program or any exercise program that he/she undertakes may create a physical stress resulting in harmful effects. I agree that it is solely my responsibility, as parent/legal guardian of my child, to consult with a physician before allowing my child to begin any exercise program to ensure that no medical condition prevents my child's participation in a swimming instruction class. I know that my child is in good physical condition and has no exercise or anything that would be detrimental to the health, safety or physical condition of my child. I hereby release EduSports, and the Boys and Girls Club/YMCA from any liability for any injury sustained by my child as a result of my child's participation in the EduSports Swimming Program.

Parent/Legal Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_