

SUMMER POOL CLUB REGISTRATION FORM • SUMMER 2010

Participant's Name: _____ Parent/Guardian (if under 18) Name: _____
Date of Birth: ___/___/___ Age: _____ Boy Girl Email Address: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone #: (Day) _____ (Night) _____
TOTAL AMOUNT DUE: \$ _____ CASH CHECK (NO REFUNDS WILL BE GIVEN)
 CREDIT CARD: VISA MC DSCVR AMEX Card # _____ Exp. Date: _____
Signature: _____

All balances **MUST** be paid in full at the time of registration. **NO REFUNDS WILL BE GIVEN.**

Please Read Carefully and sign the following Registration-Understanding/Waiver.

In consideration for being allowed to participate in any way in GOODSPORTS USA athletic/sports programs, and related events, I the undersigned voluntarily agree to assume full and complete responsibility for any injury or accident which may occur to the above named child during or in connection with GOODSPORTS USA or it's staff while they/I am on the premises of GOODSPORTS USA. I acknowledge that at GoodSports USA, I/they will participate in activities that may involve, among other things, physical contact with persons or objects, including the ground, and may incur a risk of injury. I specifically waive, give up and release GoodSports USA and its staff, from all liability for any claim for damages which I/the above named child may have relating to injuries or illness that I/they may sustain. In signing this waiver, I certify that I/the above child are in good health, with no chronic illness or abnormal tendencies. In the event of an emergency in which I/the above child requires medical care, I authorize GOODSPORTS USA to act for me and obtain whatever medical, surgical or dental examination, diagnosis and/or treatment is deemed necessary. GOODSPORTS USA is not responsible for my personal belongings which are lost, stolen, or damaged. I agree to have all fees paid in full before the first game. I further understand that I should be aware of my/the above named child's physical limitations and agree not to exceed them. I agree to review the rules and inspect the facilities and if I believe it is unsafe I will advise his or her coach and refuse to participate. GoodSports reserves the right to cancel or change any scheduled events.

Signature: _____ Print Name: _____

You **MUST** mark which program(s) you are registering for.

- **Use One form per person.** Please call us for additional forms if needed or visit us online.
- **Do NOT use this form for:** Parties, Facility Rentals or Infant Aquatic Survival

SWIM LESSONS

Private Lessons MUST be scheduled with Aquatics Manager
Megan MacLean 732-681-8898 Ext. 24

GROUP SWIM LESSONS - Mark 1 box in each section below

1. CHOOSE SESSION DATES:

- Session 1: June 28 - July 8
- Session 2: July 12 - July 22
- Session 3: July 26 - August 5

2. CHOOSE AMOUNT OF SESSIONS:

- 1 Session/8 Lessons/\$195
- 2 Sessions/16 Lessons/\$350
- 3 Sessions/24 Lessons/\$465

3. CHOOSE SESSION TIME:

- 9:00-9:45am
- 11:00-11:45am

4. CHOOSE GROUP:

(Age is only a guideline - placement will be determined by ability)

- Guppies (ages 3-5)
- Stingrays (ages 6-8)
- Sharks (ages 9-12)

AQUATICS PROGRAMS

Infant Aquatic Survival Instruction MUST register with
Beth Ann Marron email: bethannmarron@gmail.com

- Baby & Me Swim
 - Member: \$100
 - Non-Member: \$150

POOL MEMBERSHIPS

List all members names and D.O.B./Under 2yrs -FREE

- 1 - \$300 _____
- 2 - \$520 _____
- 3 - \$660 _____
- 4 - \$740 _____
- 5 - \$850 _____
- 6 - \$900 _____

Members MUST reside at same household I.D. required