

# 2010 Strongsville Swim League

## ~ Consent and Release ~

Swimmer's Names (First, Last)	Birth Date	Age as of June 1, 2010
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Parent's Names (First, Last)** \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mom Email: \_\_\_\_\_ Dad Email: \_\_\_\_\_

Mom cell: \_\_\_\_\_ Mom work phone: \_\_\_\_\_

Dad cell: \_\_\_\_\_ Dad work phone: \_\_\_\_\_

I/we the undersigned, parent(s) and/or guardian of the above named youth(s), do hereby give my/our consent to participate in the training, competitive meets, and functions of the **LedgePark Swim Team**, member of the Strongsville Swim League (SSL), which will provide a supervised, competitive swim program. I/we do hereby give approval for participation in all scheduled activities during the 2010 season. I/we, do further release, absolve, and hold harmless the SSL, **LedgePark Swim Team**, and the Officers and Coaches of both organizations. In case of injury to my/our child, I/we waive all claims against the SSL, the **LedgePark Swim Team** organizers, the City of Strongsville, and the Strongsville Recreation Department, sponsors, or any of the supervisors appointed by them. Any adult supervisor of the **LedgePark Swim Team** is hereby given authority to call for, permit, and provide medical care for my/our child and to consent to the provision of care of such child by medical practitioners or a hospital. I/we also certify that my/our child is in good health and has no disabilities which would keep him/her from participating in the **LedgePark Swim Team** practices, meets, and functions. I/we understand that swim team insurance will be included in the price of the registration fee.

I/we also understand the need for parental involvement as a vital part of my/our child's/children(s) learning experience with the Team as well as the obligation to share in the activities of the Team. Therefore, by executing this form, I/we agree to participate in either the identified volunteered activities or ones that shall be assigned by the **LedgePark Swim Team**. I/we understand that the CHAMPS line-up is based on individual times for relays.

I/we also agree to keep within the rules and the bylaws of the SSL and guarantee that we *do not* live in the neighborhood of another team. These neighborhoods include the following: Westwood Farms, High Point, Bent Tree/Spyglass, CoMoor, Huntington Park, Meadowood, Chandler Commons, Deerfield Lake, Deerfield Woods, Eastland Park Estates, or Waterford Crossing.

Preferred Hospital \_\_\_\_\_

Preferred Physician \_\_\_\_\_ Phone \_\_\_\_\_

Preferred Dentist \_\_\_\_\_ Phone \_\_\_\_\_

Signature \_\_\_\_\_ Relationship \_\_\_\_\_ Date \_\_\_\_\_