



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Swim Team Parent Information Form 2011- 2012

Name: _____

Address: _____

City, State, Zip _____

Date of Birth: _____

Home Phone: _____ Cell Phone: _____

Parent Name: _____ Work Phone: _____

Parent Name: _____ Work Phone: _____

Parent Email: See below Parent Email: See Below

PLEASE EMAIL : jschroeder@ymcabwv.org your email address or please write clearly.

Parent Email: _____

Parent Email: _____

I am aware that parent participation is required at swim meets and that I will be assigned a meet to assist in working.

I give permission for the above form to be given to BCY swim team parents for communication purposes.

I understand that the YMCA of the Brandywine Valley activities have inherent risks and I hereby assume all risks and hazards incident to my participation in all YMCA of the Brandywine Valley activities. I further waive, release, absolve, indemnify and agree to hold harmless the YMCA of the Brandywine Valley, the organizers, volunteers, supervisors, officers, directors, participants, coaches, referees, as well as, persons or parents transporting participants to and from activities from any claims or injury sustained during my participation in the YMCA of the Brandywine Valley activities.

I have read this waiver and understand it.

Signature of Parent/Guardian

Date