

JAMIE'S WAIVER

Student's Name _____

WAIVER/RELEASE OF LIABILITY

PLEASE READ CAREFULLY BEFORE SIGNING. THIS IS A RELEASE OF LIABILITY AND WAIVER OF CERTAIN LEGAL RIGHTS.

I, _____, the parent/guardian and/or the enrolled participant of the participant agree and understand that swimming is a hazardous activity. I recognize that there are risks inherent in the sport of swimming, including but not limited to, paralyzing injuries and death.

The participant hereby agrees to participate in swimming lessons and/or any pool activities and hereby agrees to indemnify and hold harmless Jamie's School of Fish, its instructors, directors, agents, and employees against any liability resulting from any injury that may occur to the participant while participating in swimming lessons or any pool activity. The participant also agrees to indemnify Jamie's School of Fish for any damages incurred arising from any claims, demand, action, or cause of action by the participant.

The participant and/or the parent or guardian authorizes any representative of Jamie's School of Fish to have the participant treated in any medical emergency during the participation in swimming lessons or any pool activity. Further, the participant and or/ the parent or guardian agrees to pay all costs associated with medical care and transportation for the participant.

I HAVE CAREFULLY READ THE ABOVE LIABILITY RELEASE AND SIGN IT WITH FULL KNOWLEDGE OF ITS CONTENTS AND SIGNIFICANCE.

Required Signature _____ Date _____

EMERGENCY/MEDICAL INFORMATION REQUIRED

There are **NO** issues at this time to document and agree to notify staff in writing if any change occurs.

Required Signature _____ Date _____
(Participant or Parent/Guardian)

Below, I have noted the medical/health problems which the staff should be aware relating to students and parents that are involved in or around the lesson area throughout the entire year while in lessons .

Required Signature _____ Date: _____
(Participant or Parent/Guardian)

Read and initial the policies below and then sign and date below.

MAKE-UP POLICY

___ There are **NO** make-ups when a student misses a lesson unless JSOF CLOSES the pool for unforeseen circumstances.

REFUND POLICY

___ I am aware that there are **NO** refunds for any class fees once students have been registered in classes. It is up to the client to notify JSOF of any cancellation of the remainder of classes , so credits can be issued to their account to be used within a year of the cancellation date. Credits can be used on any family members on the account on any full registration enrollments.

NO SOLICITATION POLICY

___ The clients **cannot solicit any of the staff for any services** , including but not limited to babysitting or swimming lessons, while the staff is employed with JSOF. If you are interested in lifeguarding services, you can contact the office to arrange for these privately contracted services with JSOF instructors. All of our instructors are CPR/ First Aid/ Lifeguard certified.

PHOTO WAIVER

I, _____, the parent/guardian of _____, hereby give Jamie's School of Fish Swim School or anyone authorized by Jamie's School of Fish Swim School permission to use any photos taken of my child at the Jamie's School of Fish Swim Facility for both advertising and/or promotional purposes now or at any time in the future. Mark **ONE** of the below responses to accept or decline this statement.

___ I accept the above statement

___ I decline the above statement

I have read and understood all the above policies on this page. I have also read and I agree with the informed consent and release outlined above on the photo waiver, as it relates to my son/daughter.

Required Signature _____ Date: _____
(Participant or Parent/Guardian)