

TRI-TOWN YMCA SWIMMING & SUNSCREEN APPLICATION AUTHORIZATION FORM

Directions: Please legibly print and complete all components of this form and return it by the first day of the program to: ATTN: Tri-Town YMCA Program Registration, 105 W. Maple Street, Lombard, IL 60148

| PARTICIPANT SWIMMING COMPETENCY INFORMATION | | | | | |
|---|---|------------------------------|--|--|--|
| Participant's First & Last Name | Please mark the highest level that you authorize your child to swim in when in the care of Tri-Town YMCA. Please note, for everyone's safety, Tri-Town YMCA will evaluate all children during their first visit to the swimming pool to determine their swimming competency skills. If there is a discrepancy between what has been authorized and what is witnessed by staff, Tri-Town YMCA will notify you. | | | | |
| | | | | | |
| | □ Unsure, please test my child. | 1 inch to 3 feet of water | | | |
| | □ 3 feet to 5 feet of water | 5 feet of water or greater | | | |
| | □ Unsure, please test my child. | I inch to 3 feet of water | | | |
| | I 3 feet to 5 feet of water | 5 feet of water or greater | | | |
| | Unsure, please test my child. | □ 1 inch to 3 feet of water | | | |
| | □ 3 feet to 5 feet of water | □ 5 feet of water or greater | | | |
| | □ Unsure, please test my child. | 1 inch to 3 feet of water | | | |
| | □ 3 feet to 5 feet of water | □ 5 feet of water or greater | | | |

By signing this form, I authorize Tri-Town YMCA to reapply sunscreen to my child(ren)/ward(s) that I have labeled with my child(ren)/ward(s)'s name(s) and provided to Tri-Town YMCA.

In case of MEDICAL EMERGENCY, I authorize Tri-Town Young Men's Christian Association, its directors, officers, employees, agents, volunteers, and designees (collectively "Tri-Town YMCA") to take such emergency action as may be deemed necessary.

Please read this form carefully and be aware that enrolling and participating in any program/course/activity/event, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages, or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/course/activity/event.

I recognize and acknowledge that there are certain risks of physical injury associated with participating in this program/course/activity/event, and I voluntarily agree to assume the full risk of any injuries, damages, or losses, regardless of severity, that I or my minor child/ward may sustain as a result of such participation. I fully understand and agree that all program/course/activity/event shall be at my or my minor child/ward may have or which may occur to me and/or my minor/ward as a result of participation in this program/course/activity. I do hereby fully release and forever discharge the Tri-Town YMCA and the Young Men's Christian Association of the USA from any and all claims for injuries, damages, or loss that I or my minor child/ward may have or which may occur to me or my minor child/ward and arising out of, connected with, or in release of all claims.

I, hereby grant Tri-Town YMCA non-revocable permission to capture my/my minor child/ward image and likeness in photographs, videotapes, motion pictures, recordings, or any other media (collectively "Images"). I acknowledge that Tri-Town YMCA will own such Images and further grant Tri-Town YMCA permission to copyright, display, publish, distribute, use, modify, print, and reprint such Images in any manner whatsoever related to Tri-Town YMCA business, including without limitation, publications, advertisements, brochures, web site images, or other electronic displays, and transmissions thereof. I further waive any right to inspect or approve the use of the Image by Tri-Town YMCA prior to its use. I forever release and hold Tri-Town YMCA harmless from any and all liability arising out of the use of the Images in any manner or media whatsoever, and waive any and all claims and causes of action relating to use of the Images, including without limitation, claims for invasion of privacy rights or publicity.

I have read and understand the Tri-Town YMCA's General Registration and Refund Policies.

Participant or Parent/Guardian Signature

Date

OFFICE USE ONLY

| Date Received: | Date Entered into Database: | Entered by: | Sunscreen Type: | Any Additional Notes: |
|----------------|--------------------------------|-------------|-----------------|-----------------------|
| | | | | |