VERMILION COMMUNITY POOL



12022 Rotary Swimming Registration Form

Please return completed form to pool manager by June 8, 2022

Please Choose a	Session Time for the	June 13th—17th		
	10:00 AM	6:00 PM		
Child(ren) Inforn	nation:			
Name (Last, First)		Age	DOB	
Name (Last, First)		Age	DOB	
Name (Last, First)		Age	DOB	
Parent Informati	on:			
Name (Last, First)		Phone Number		
Address		Email Address	Email Address	
activity or program be liable for any claim directly or indirectly ion, their agents or enhalf of the participant agents or employees	peing offered is for the ben ms, injuries, or damages, v attributable to the negliger employees, arising out of, o t and myself, I expressly r s from such claims, injuries	ties or programs is completely verifit of the participant. The City of whatever the nature, incurred by nce, whatever passive or active or in connection with the activity release and discharge the City of sor damages. I understand this e facility used in the activity or participated in	of Vermilion shall not y participants who are , of the City of Vermil- y or programs. On be- of Vermilion, their waiver includes any	
Parent Signature:		Date	Date	
Pool Manager Signature:		 Date	Date	