



*Hammonton Swim Club*

115 Berwyn Ave, Hammonton, NJ 08037  
 hammontonswimclub.com | 609-567-8667

# Hammonton Stingrays Swim Team Registration Form – Summer 2021 (Suburban Swim Association of South Jersey)

### Swimmer(s) Information (list up to five)

| # | Name (First and Last) | Gender (M or F) | Date of Birth | Medical Conditions (list as/if applicable) |
|---|-----------------------|-----------------|---------------|--|
| 1 |                       |                 |               |  |
| 2 |                       |                 |               |  |
| 3 |                       |                 |               |  |
| 4 |                       |                 |               |  |
| 5 |                       |                 |               |  |

### Parent(s) and/or Guardian(s) Information (list up to four)

| # | Name (First and Last) | E-Mail | Phone (best # in case of emergency) |
|---|-----------------------|--------|-------------------------------------|
| 1 |                       |        |                                     |
| 2 |                       |        |                                     |
| 3 |                       |        |                                     |
| 4 |                       |        |                                     |

### Parent/Guardian Agreement, Consent, and Waiver of Liability (for all swimmers listed above)

By submitting this membership form, as the parent and/or legal guardian of the above listed child(ren), I am providing consent for my child(ren) to participate as a team member with the Hammonton Stingrays swim team. In providing this consent, I agree to the following:

- I release the Hammonton Recreation Club Inc. (d/b/a Hammonton Swim Club, or “Swim Club” and on behalf of the Hammonton Stingrays Swim Team, or “swim team”) including (but not limited to) its employees, coaching staff, instructors from any and all claims from injury or damage that may be sustained by me or my child(ren) from the use of the Swim Club premises or equipment while participating in swim team activities.
- I hereby represent that my child(ren) is (are) in good health and capable of participating in the physical requirements of the swim team. I further certify that my child(ren) will refrain from participating in irrational activities that would injure himself/herself (themselves) or others while participating in swim team activities. I will hold the Swim Club (and its affiliates) harmless in connection with my child(ren)’s participation.
- If an accident or injury occurs, I give the Swim Club and its staff permission to obtain medical attention and/or required treatment.
- I agree that my child(ren) must be listed as an additional member on a valid Swim Club membership plan (e.g., family membership or a plan that includes a minor and/or a Youth Sport Membership plan) that is paid in full prior to the first swim meet of the season and if this condition is not met I agree that my child(ren) will not be able to participate in swim team activities, including swim meets and/or practices.
- I agree to volunteer my time and services at both home and away swim meets (e.g., work), or have another adult commit to doing so in my absence, and I further agree that I and my child(ren) will abide by the swim team code of conduct (see separate attachment[s]).

| <u>Print Name</u> | <u>Signature</u> | <u>Date</u> |
|-------------------|------------------|-------------|
|                   |                  |             |

| <u>Registration Fee *</u> |                  | Please fill out the registration form completely and mail to address at top or e-mail to info@hammontonswimclub.com.<br><br>• If mailing and enclosing payment, please make check payable to “Hammonton Recreation Club” and indicate on check that payment is for “Stingrays” or “swim team”.<br>• If paying via cash, credit/debit card, or PayPal please make payment on-site at the Hammonton Swim Club (during regular operating hours) and a \$10 service fee will be added to the total registration fee.<br><br>Please contact Shawn McCloud with any questions or for additional information: 609-457-1639<br><br>* Registration fee excludes swimsuit (solid, royal blue) and/or swim cap/goggles, etc. required for swim meets. |
|---------------------------|------------------|--|
| <u># Swimmers</u>         | <u>Total Fee</u> |  |
| 1                         | \$60             |  |
| 2                         | \$110            |  |
| 3                         | \$160            |  |
| 4                         | \$210            |  |
| 5                         | \$260            |  |

# SUBURBAN SWIM ASSOCIATION OF SOUTH JERSEY

## RELEASE OF LIABILITY FOR MINOR PARTICIPANTS

### READ BEFORE SIGNING

IN CONSIDERATION OF my child(ren) being allowed to Name of Minor Child(ren) participate in any way in any and/or all events and/or activities sanctioned by, or related to, the Suburban Swim Association of South Jersey (SSASJ), the undersigned acknowledges, appreciates, and agrees that:

The risks of injury and illness (ex: communicable diseases such as MRSA, influenza, and COVID-19) to my child from the activities involved in these programs are significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce these risks, the risks of serious injury and illness do exist; and,

1. FOR MYSELF, SPOUSE, AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation; and,
2. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from the participation and bring such attention of the nearest official immediately; and,
3. I myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the SSASJ; its directors, officers, officials, agents, employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
4. I, for myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.
5. I, the parent/guardian, assert that I have explained to my child(ren): the risks of the activity, his/her responsibilities for adhering to the rules and regulations, and that my child(ren) understands this agreement.

**I, FOR MYSELF, MY SPOUSE, AND CHILD(REN), HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

Name of Child(ren): \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

### **UNDERSTANDING OF RISK**

I understand the seriousness of the risks involved in participating in this program, my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

Name of Child(ren): \_\_\_\_\_

Signature of Child(ren): \_\_\_\_\_

Date Signed: \_\_\_\_\_