



2011 School of Fishes Registration

Date _____

Parent/Guardian Name _____

Phone _____ E-Mail Address _____

Address _____

Child 1: Name _____

Birth Date _____ Age as of June 1 _____

Child 2: Name _____

Birth Date _____ Age as of June 1 _____

Child 3: Name _____

Birth Date _____ Age as of June 1 _____

Registration Fee

\$45 per child _____

X _____

Total \$ _____

Permission

Permission is given for _____ to participate in the School of Fishes swim lessons at the Fontainebleau Swim & Tennis Club (FSTC) in 2011. I will in no way hold responsible FSTC, any of its members, officials, officers, or participants, should any accident, injury, etc. happen to occur during team workouts, meets, or transportation to and from these events. On behalf of my children herein listed, myself, my heirs, personal representatives and next of kin, I hereby release and discharge FSTC, its successors, assigns, affiliates, directors, officers, members, participants and agents from any and all liabilities, claims, lawsuits, losses, costs, causes of action and damages of any kind originating or in any way arising from their participation in such activities.

_____ Parent signature