



City of La Palma Community Services Department



SUMMER SWIMMING LESSONS

John F. Kennedy High School swimming pool

Each weekday M-TH session will include eight 35-minute lessons over the course of two weeks

Session 1			June 17 - 27	Starfish	Polliwog	Guppy	Minnow	Fish	Fly Fish	Shark
			Resident Non-Resident	\$57 \$62	11:00a - 11:35a	8994	8966	8916	8941	8872
	11:40a - 12:15p	8995			8967	8917	8963	8873		
	12:45p - 1:20p	8996			8968	8918	8942	8895	8909	
	1:25p - 2:00p	8997			8969	8919	8943	8874	8899	
	2:05p - 2:40p	8998			8970	8920	8944	8875		
	2:45p - 3:20p	8999			8971	8921	8945	8876		
	3:25p - 4:00p	9000	8972	8922	8946	8877	8900			

Session 2			July 1 - 12	Starfish	Polliwog	Guppy	Minnow	Fish	Fly Fish	Shark
			Resident Non-Resident	\$57 \$62	11:00a - 11:35a	9005	8977	8927	8951	8882
	11:40a - 12:15p	9006			8978	8928	8964	8896		
	12:45p - 1:20p	9007			8979	8929	8952	8883	8910	
	1:25p - 2:00p	9008			8980	8930	8953	8884	8914	
	2:05p - 2:40p	9009			8981	8931	8954	8885		
	2:45p - 3:20p	9010			8982	8932	8955	8886		
	3:25p - 4:00p	9011	8983	8933	8956	8887	8911			

Session 3			July 15 - 25	Starfish	Polliwog	Guppy	Minnow	Fish	Fly Fish	Shark
			Resident Non-Resident	\$57 \$62	11:00a - 11:35a	9012	8984	8934	8957	8888
	11:40a - 12:15p	9013			8985	8935	8965	8897		
	12:45p - 1:20p	9014			8986	8936	8958	8889	8912	
	1:25p - 2:00p	9015			8987	8937	8959	8890	8915	
	2:05p - 2:40p	9016			8988	8938	8960	8891		
	2:45p - 3:20p	9017			8989	8939	8961	8892		
	3:25p - 4:00p	9018	8990	8940	8962	8893	8913			

This session consists of six 35-minute lessons over six consecutive Saturdays

Sat. Session			Jun 22 - July 27	Starfish	Polliwog	Guppy	Minnow	Fish	Fly Fish	Shark
			Resident Non-Res	\$44 \$49	9:30a - 10:05a	9001	8973	8923	8947	8878
	10:10a - 10:45a	9002			8974	8924	8948	8879		
	10:50a - 11:25a	9003			8975	8925	8949	8880	9020	
	11:30a - 12:05p	9004			8976	8926	8950	8881		

Participant FIRST Name		Participant LAST Name			Participant BIRTH DATE	
Adult / Guardian FIRST Name				Adult / Guardian LAST Name		
Address						
City				State		Zip
Best Contact Phone			Email Address			

WAIVER ON BACK MUST BE COMPLETED

Class #	Class Name	Session	Fee



LA PALMA RECREATION AND COMMUNITY SERVICES DEPARTMENT

WAIVER, RELEASE, HOLD HARMLESS, and AGREEMENT NOT TO SUE

(Minor's Full Name) _____ has my permission to participate in La Palma Summer Swimming Lessons (hereinafter "Summer Swim Lessons") from June 17, 2019 through July 27, 2019. I fully understand that my child's participation in Summer Swim Lessons exposes him/her to the risk of personal injury, death, or property damage. I hereby acknowledge that I am voluntarily having my child participate in Summer Swim Lessons and agree to assume any such risks.

I hereby release, discharge and agree not to sue the City of La Palma for any injury, death or damage to or loss of personal property arising out of, or in connection with my child's participation in Summer Swim Lessons from whatever cause, including the active or passive negligence of the City of Palma or any other participants in Summer Swim Lessons. The parties to this agreement understand that this document is not intended to release any party from any act or omission of "gross negligence," as that term is used in applicable case law and/or statutory provision.

In consideration for being permitted to participate in Summer Swim Lessons, including but not limited to supervised swim lessons; I hereby agree, for myself, my heirs, administrators, executors and assigns, that I shall indemnify and hold harmless the City of La Palma from any and all claims, demands, actions, or suits arising out of or in connection with my child's, participation in Summer Swim Lessons.

Furthermore, I give the City of La Palma, its officers, agents or employees permission to use any related picture, video or electronic images, sounds etc., in the Department's promotional materials.

In addition to the above, I, the undersigned parent or legal guardian of the aforementioned minor, do here authorize and consent to any x-ray examination, anesthetic, medical or surgical diagnosis rendered under the general or special supervision of any member of the medical staff and emergency room staff licensed under the provisions of the Medicine Protection Act or a current license to operate a hospital from the State of California Department of Health. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power to render care which the aforementioned physician in their exercise of his or her best judgment may deem advisable. It is understood that effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatments will not be withheld if the undersigned cannot be reached.

I HAVE CAREFULLY READ THIS WAIVER, RELEASE, HOLD HARMLESS, AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT IT IS A FULL RELEASE OF ALL LIABILITY AND I SIGN IT ON MY OWN FREE WILL.

Date: _____ Signature of Applicant/Parent: _____

EMERGENCY CONTACT INFORMATION

Printed Name: _____ Cell Phone: _____ Work Phone: _____

Printed Name: _____ Cell Phone: _____ Work Phone: _____



YMCA MEMBER/CHILDREN RELEASE and WAIVER of LIABILITY and INDEMNITY AGREEMENT

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA (or for my children to so participate) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and such participating children and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH THE YMCA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

- 1. THE UNDERSIGNED ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY RELEASES, WAIVES, DISCHARGES AND CONVENANTS NOT TO SUE the YMCA and all branches thereof, its directors, officers, employees, and agents (hereinafter referred to as "releases") from all liability to the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned or such children whether caused by the negligence of the releases or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any, loss, liability, damage or cost they may, incur due to the presence of the undersigned or such children in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releases or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such children due to negligence of releases or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

I HAVE READ AND UNDERSTAND THE YMCA MEMBER/CHILDREN RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

Date: _____ Signature of Applicant/Parent: _____

Name of Child in Program: _____