Island Swim School L.L.C.

At Le Jardin Academy Pool
Winter and Spring 2017 Student Registration Form
Swim Lessons and Swim Club

Caring, personal swim instruction for children ages five and older.

Student name_____ **Age**_____ Grade _____

Swim Lessons:

1–3 students per instructor, 30-min classes.
Session Fee: $345 for 15 classes.

Select: Tuesday Lesson
Thursday Lesson
Saturday Lesson

Tuesday and Thursday Class time assigned according to swim level and dismissal time. 2:45–3:15 and 3:15–3:45

Saturday class times:
11:00 11:30 12:00 12:30 1:00

Student's Current Swimming Level:
Please circle: Cautious Beginner, Confident Beginner, Intermediate, Advanced.

Swim Club:

4–8 students per coach, 55-60min classes.
Stroke refinement, swim workout and games.
Session Fee: $315 for 15 classes

Select: Thursday Club
Saturday Club

2:50–3:45 on Thursday
10:30–11:30 on Saturday

To begin Swim Club, students should be able to swim 100 yards of front crawl stroke with flutter kick and side breathing, and at least 25 yards of backstroke.

Please note any medical conditions or concerns that swim instructors should be aware of:

Winter & Spring 2017 Session Dates:
Tuesday Lessons: February 7 through May 23. No class March 28th.
Thursday Lessons: February 9 through May 25**.** No class March 30th.
Saturday Lessons: February 4 through May 20. No class April 1st.
Thursday Club: February 9 through May 25. No class March 30th.
Saturday Club: February 4 through May 20. No class April 1st.

To Register: Please fill out this form, sign waiver and send with payment to:
Island Swim School, 951 Kainui Drive, Kailua, Hawaii, 96734

Questions? Contact Kathy Erwin 808-391-5284 kathyerwin808@gmail.com
We appreciate the opportunity to work with you and your children.

ISLAND SWIM SCHOOL, L.L.C.
at Le Jardin Academy
Informed Consent and Assumption of Risks

Island Swim School, L.L.C. provides a variety of swim lessons and programs in a safe and caring environment. However, there are certain inherent risks to almost every recreational activity. Please read the following informed consent categories to acquaint yourself with the risks involved. If you are making a determination that a child is able to participate in swim lessons and programs, it is your responsibility to assess your child's maturity and fitness, and determine for yourself if the risks associated with this activity are acceptable to you. While *Island Swim School, L.L.C.* hopes that every participant enjoys an injury-free swim lesson or program, by signing this Release Of Claims form, you assume all risks associated with the swim lesson or program for which you or your child have registered. Please ask any questions of the staff to make a fully informed decision to participate.

Even swimming has inherent risks, such as drowning, slippery pool-side surfaces or shallow water and hard bottoms and walls. There are, therefore, risks of broken bones, soft tissue injuries, dental injuries, spinal and head injuries or death. There is also the risk of bruising and lacerations and other injuries from slipping and falling.

In addition, all sports require a level of fitness and health that only you and/or your physician can determine you or your child possesses. We strongly urge that you obtain medical advice as to whether swimming is suitable for you or your child. Undetected or chronic diseases such as cardiac disease or high blood pressure may be worsened by participation in swimming.

Release of All Claims and Indemnification

1. In consideration of permission granted to participant by *Island Swim School, L.L.C.* to participate in the swim lessons and programs, I hereby release, discharge, and covenant not to sue *Island Swim School, L.L.C.* and *Le Jardin Academy*, their agents, employees, members and officers from all actions, causes of action, damages, claims, or demands which I and/or the participant ever had, now has, or may have, or which participant's relatives, heirs, executors, administrators, or assigns may have, or claim to have against *Island Swim School, L.L.C.* and *Le Jardin Academy*, their agents, employees, members and officers for all personal injuries and property damage, known or unknown, which I and/or participant have or may incur by participating in the above-described swim lessons and programs.
2. As additional consideration for permission to participate in the swimming lessons and programs, I agree to indemnify, save and hold harmless *Island Swim School, L.L.C.* and *Le Jardin Academy,* their agents, employees, members and officers from any and all deaths, injuries, losses and damages to persons or property, and any and all claims, demands, suits, actions and liability therefore, caused by the participant's participation in the above-described swimming lesson and programs.
3. I hereby authorize such medical treatment as deemed necessary in the event of illness or injury to said participant.
4. I, as a parent or legal guardian of the child participant, represent to *Island Swim School, L.L.C.,* that the facts I have provided concerning the participant are true. I hereby give permission for the participant to participate in the swim lessons and programs, and agree individually and on behalf of the participant, to the terms of the above *Release of All Claims and Indemnification.*
5. I have read the informed Consent and Assumption of Risk, Release of Claims and Indemnification for the swim lessons and programs. I certify that the information provided on the registration form is complete and correct and that I hereby authorize *Island Swim School, L.L.C.* to contact the appropriate parties to verify this information. I understand that any changes to this form must be received in writing from the parent or legal guardian.

_____ _____
Signature of Parent or Adult Participant *Date*

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Printed Name of Child Participant