NEW YORK STATE OF OPPORTUNITY. | Parks, Recreation and Historic Preservation

Received Date ____/____/____

Notified Participant Date ____/____/____

Finger Lakes State Parks

2015 LEARN TO SWIM PROGRAM

(Ages 5 through 12)

REGISTRATION FORM

The Program is FREE to all Participants

Location: Cayuga Lake State Park
2678 Lower Lake Rd
Seneca Falls NY Park office: 315-568-5163

CHILDS NAME: _____ Date of Birth ___/___/_____ age _____
(Please print clearly)

Previous experience/level - check one: ( ) NO ( ) Yes if yes...what level? _____

Parent or Guardian Name: _____

Parent or guardian is required to be present during each class

ADDRESS: _____ APT. #: _____

CITY: _____ STATE: _____ ZIP: _____

HOME/cell PHONE: _____ Work Phone: _____

EMERGENCY CONTACT (other than parent or guardian)

NAME: _____

ADDRESS: _____ APT. #: _____

CITY: _____ STATE: _____ ZIP: _____

HOME/cell PHONE: _____ Work Phone: _____

PLEASE READ THE FOLLOWING STATEMENT AND SIGN BELOW BEFORE SUBMITTING.

In consideration of my child's entry into any program intending to be legally bound, do herby for myself my heirs, executors and Administrators, wave, release and forever discharge any and all rights and claims for damages including any claims for loss, damages or injury to my person or property arising out of the performance or failure of performance of the State of New York, NYS Office of Parks, Recreation and Historic Preservation and any supporters or sponsors and their representatives and successors. I attest and verify that my child is physically fit and their physical condition has been verified by a licensed medical doctor that they are physically fit to complete this program.

_____

Parent/Guardian SIGNATURE **DATE**

Parent or guardian is required to be present during each class

(Please choose one from the following)

1 Session **August 3 - 14, 2015** Deadline for sign-up is July 3rd 2015

☐ Morning Class – 11:00am to 12:00pm

Participants receive a "Learn to Swim" Certificate upon completion.

Each Session is 10 days in length (Monday – Friday) and lasts approximately 30 minutes.

Participants will be divided into classes according to skill level.

Participants and Parent/Guardian are expected to attend every session during the 10 day period.

PHOTO RELEASE AGREEMENT

I HEREBY AFFIRM that I am 21 years of age or older and that I grant New York State Parks, Recreation and Historic Preservation its successors or assigns, agents or employees the right to use any image of me and / or my minor or custodial children, from the photographs taken on or about Learn to Swim Program, whether photographic or electronic, for any purpose, including but not limited to: exhibition, internet, publication or promotion, commercial or non-commercial.

I ALSO HEREBY WAIVE all claims to any fees or any other considerations or remuneration for use of such images regardless of their realized or potential commercial value and release its employees or agents and assigns from all claims and liability relating to said photographs and / or images.

_____ _____

Parent/Guardian SIGNATURE **DATE**

Please return this registration form to:

Cayuga Lake State Park
2678 Lower Lake Rd
Seneca Falls NY 13148
Attn: Learn to Swim
FAX 315-568-5336
Michael.krish@parks.ny.gov