



I acknowledge that I have received, read and understood the Minor Athlete Abuse Prevention Policy and/or that the Policy has been explained to me or my family. I further acknowledge and understand that agreeing to comply with the contents of this Policy is a condition of my membership with Vallejo Aquatic Club.

(1) **Athlete/Swimmer** Print Name: _____

Signature: _____

Date: _____ | _____

(2) **Athlete/Swimmer** Print Name: _____

Signature: _____

Date: _____

(1) **Parent/Guardian** Print Name: _____

Signature: _____

Date: _____

(2) **Parent/Guardian** Print Name: _____

Signature: _____

Date: _____