***WRITTEN* *ACKNOWLEDGEMENT OF***

 ***MINOR ATHLETE ABUSE PREVENTION POLICY***



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 **TAMPA BAY AQUATIC CLUB**

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: