

WRITTEN ACKNOWLEDGEMENT OF MAAP 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 Three Rivers Swim Club.

Swimmer's Name: _____

Parents Name:

Signature: _____

Date: _____

*You may also sign off digitally by clicking [here](#).