***WRITTEN ACKNOWLEDGEMENT OF***

***MAAPP POLICY***



I acknowledge that I have received, read and understood the Minor Athlete Abuse Prevention Policy (MAAPP) 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 **Arena Club Aquatics (ACA) swim team**.

Name:

Signature:

Date: