



Sonner Aquatic Facility Waiver of Liability for Lesson Participants

Participant Name: _____	Birthdate: _____
Parent/Guardian Name: _____	
Email: _____	Phone: _____
Address: _____	

Please read this form carefully and be aware that in signing up for and participating in program(s) at the Sonner Aquatic Facility you will be waiving and releasing all claims for injuries you or the participants might sustain as a result of participation in these programs.

Waiver of Liability

As a participant or guardian of a participant in this, or any future programs, I/we recognize and acknowledge that there are certain risks of physical injury and agree to assume the full risk of any injuries, including death, damages or losses which the participant(s) may sustain as a result of participating in any and all activities connected with or associated with such programs.

_____ I have read the above and agree.

Medical Authorization

I/we authorize any representative of Raleigh Swimming Association, (RSA), to have the participant treated in any medical emergency during their participation in the program. Further, the participant and/or parent/guardian agrees to pay all costs associated with medical care and transportation for the participant.

_____ I have read the above and agree.

Pictures and Videos Policy

On occasion, RSA will have photographers and/or videographers come to photograph/video our students in swim classes or sponsored events. The photographs/videos may be used in advertising, on our web site, in our scrapbooks, etc. Names of children will not be used.

_____ I have read the above and agree.

Makeup Policy

RSA does not offer makeup classes for group lessons unless there is a pool closure or a staffing emergency.

For private and semi-private lessons, a minimum of twenty-four hours (24) advance notice is required to reschedule lessons. The request must be sent in writing via email to wsa@swimrsa.org or the lesson will not be rescheduled.

There will be no rescheduling for same day cancellations or no-shows. We understand there are extreme situations, so please contact our Lesson Coordinator at wsa@swimrsa.org or 919-859-4881 regarding your specific situation.

_____ I have read the above and agree.

Closure Policy

RSA reserves the right to close the pool at any time due to inclement weather and/or pool contaminations. Closures will be communicated via email notifications, phone calls, posts to the RSA website (www.swimrsa.org) or texts.

_____ I have read the above and agree.

Refund Policy

RSA does not offer refunds.

_____ I have read the above and agree.

In enrolling myself, my child(ren) or future family members in programs operated at the William H. Sonner Aquatic Facility (owned and operated by Raleigh Swimming Association), I have read and understand the WAIVER OF LIABILITY, MEDICAL AUTHORIZATION, PICTURES AND VIDEOS POLICY, CLOSURE POLICY, MAKEUP POLICY and REFUND POLICY and I VOLUNTARILY affix my name in agreement.

Signature

Date