| Junor Guard Conditioning Camp |
| --- |
| Mc Gaugh pool 4:45-5:30 monday-thurs + jftb fri 5-6 |
| **SWIMMER’S NAME** – Last  | First | Middle Initial |
| Date of birth - M/D/Y : | **M**ale / **F**emale: | E-mail: MANDATORY |
| Current address: |
| City: | State: | ZIP Code: |
| Phone: | Date: |  |
| Emergency Contact |
| Name of Parent/Guardian: | Cell Phone: |
| Name of Parent/Guardian: | Cell Phone: |
| authorization to treat minor |
| My signature on this authorization indicates that I give permission, in my absence, for the emergency evaluation and treatment of my child by a licensed hospital facility. I understand that this form is intended only for instances when an unforeseen medical emergency arises and I am not able to give consent. I also understand that the hospital may attempt to contact me. If the hospital does contact me I will provide a formal consent as soon as possible. |
| Signature: | Date: |
| ADDITIONAL SIBLINGS also participating |
| **NAME** - Last, First, Middle: |
| Date of birth - M/D/Y :  | M / F |

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| **NAME** - Last, First, Middle: |
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| **NAME** - Last, First, Middle: |
| Date of birth - M/D/Y : |  M / F |

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| FEES & locations |
| 4 - Week Sessions | DATE  | Fees | Pool |  |
| 1 | 2/13/23 – 3/10/23 | $175 | McGaugh Pool M-Thurs 4:45 – 5:30 pm + JFTB Los Alamitos pool - Friday 5-6 pm |  |
| 2 | 3/13/23 – 4/7/23 | $175 | McGaugh Pool M-Thurs 4:45 – 5:30 pm + JFTB Los Alamitos pool - Friday 5-6 pm |  |
| 3 | 4/10/23 - 5/5/23 | $175 | McGaugh Pool M-Thurs 4:45 – 5:30 pm + JFTB Los Alamitos pool - Friday 5-6 pm |  |
| 4 | 5/8/23 – 6/2/23 | $175 | McGaugh Pool M-Thurs 4:45 – 5:30 pm + JFTB Los Alamitos pool - Friday 5-6 pm |  |
| Signature: | Date: |

By signing this form, I acknowledged that I have read and fully understand the terms, conditions & policies of SEAL Beach Swim Club. By not abiding the rules, SEAL has the right to terminate the membership.

Please make checks payable to: Seal Beach Swim Club. We also accept Zelle payments: Zelle@SealBeachSwimClub.org