



THE AQUATIC ACADEMY, LLC 2026 REGISTRATION FORM

ACCOUNT / PARENT FIRST & LAST NAME	ACCOUNT E-MAIL	MOBILE PHONE	ADDRESS	CITY, STATE, ZIP

EMERGENCY CONTACT FIRST & LAST NAME	EMERGENCY CONTACT E-MAIL	EMERGENCY MOBILE PHONE	EMERGENCY CONTACT RELATIONSHIP

PARTICIPANT / SWIMMER INFORMATION:

STUDENT'S FIRST & LAST NAME	GENDER	DOB	RACE/ETHNICITY	NOTES / ALLERGIES

ANNUAL REGISTRATION FEE \$30 (UP TO 6 SWIMMERS, NON-REFUNDABLE, \$5 PER SWIMMER 7+): _____

PAYMENT IS DUE ON THE FIRST DAY OF CLASS. CASH, CHECKS, MASTER CARD & VISA ACCEPTED. PLEASE MAKE CHECKS PAYABLE TO: THE AQUATIC ACADEMY, LLC.

STATEMENT OF LIABILITY RELEASE: I AGREE TO ASSUME ALL LIABILITY FOR MY CHILDREN AND MYSELF, AND HEREBY AGREE TO ALLOW MY CHILDREN & MYSELF TO PARTICIPATE IN AQUATIC & SAFETY INSTRUCTION CARRIED ON BY THE AQUATIC ACADEMY, LLC (THE COMPANY). I HEREBY ABSOLVE & RELEASE AND INDEMNIFY THE COMPANY, ITS OWNERS & INSTRUCTORS FROM ALL RESPONSIBILITY WITHOUT REGARD TO GUILT WHILE PARTICIPATING IN THE COMPANY'S PROGRAMMING. I UNDERSTAND THAT AQUATIC & SAFETY TRAINING ARE STRENUOUS PHYSICAL ACTIVITIES. _____

PHOTO RELEASE AND PROMOTIONAL MATERIAL CONSENT: I HEREBY GRANT THE AQUATIC ACADEMY PERMISSION TO USE MY OR MY CHILDREN'S LIKENESS IN A PHOTOGRAPH, VIDEO OR OTHER MEDIA ("PHOTO") IN ANY AND ALL OF ITS PUBLICATIONS, INCLUDING WEB-BASED PUBLICATIONS, WITHOUT PAYMENT OR OTHER CONSIDERATION. I UNDERSTAND AND AGREE THAT ALL PHOTOS WILL BECOME THE PROPERTY OF THE AQUATIC ACADEMY AND WILL NOT BE RETURNED. I HEREBY IRREVOCABLY AUTHORIZE THE AQUATIC ACADEMY TO EDIT, COPY, EXHIBIT, PUBLISH, OR DISTRIBUTE THESE PHOTOS FOR ANY LAWFUL PURPOSE. IN ADDITION, I WAIVE ANY RIGHT TO INSPECT OR APPROVE THE FINISHED PRODUCT WHEREIN MY LIKENESS APPEARS. ADDITIONALLY, I WAIVE ANY RIGHT TO ROYALTIES OR OTHER COMPENSATION ARISING OR RELATED TO THE USE OF THE PHOTO. I HAVE READ AND UNDERSTAND THE ABOVE PHOTO RELEASE. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENTS/GUARDIANS. _____

OFFICE USE ONLY: DATE ENTERED IN ICLASS & INITIALS: _____

