



Summer Recreational Swim Program

Name: (First) _____ (Last) _____

Age: _____ Date of Birth: _____ School / Grade: _____

Medical Conditions: _____

Special Needs: _____

(In an effort to better serve you please acknowledge if your child has any special needs)

For Parent or Guardian

Name: _____ (Last) _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (h) _____ (w) _____ (c) _____

Email address of parent or guardian (if available) _____

Emergency contact other than parent or guardian

Phone: (h) _____ (w) _____ (c) _____

Relationship to participant: _____

AUTHORIZATIONS and RELEASE:

Photograph Permission: I give permission for the City of Spartanburg to use any pictures of my child for future promotional purposes.

Medical Treatment: I hereby give permission for my child to be given cardiopulmonary resuscitation (CPR) and first aid treatment by a qualified staff member in the event I cannot be contacted, I also give permission for my child to be transported by ambulance to an emergency center for treatment. I further consent to the disclosure of health information and to the medical, surgical, and hospital care treatment and procedures (including, but not limited to, administration of necessary anesthetics, tests, x-ray examinations, transfusions, injections, and drugs) to be performed for my child by a licensed physician or hospital selected by the City of Spartanburg when deemed immediately necessary or advisable by the physician to safeguard my child's health.

I acknowledge that I am the parent or legal guardian of the above named child. I give my permission for this child to participate in the CC Woodson's summer recreational swim program. I further understand that any fighting, destruction of property, disrespect or failure to follow the rules of the CC Woodson's Swim Zone and City of Spartanburg employees; may expel any youth from participation in this summer program. Participants must wear proper swimsuits to be admitted to the pool. Boys must have a liner and a draw string in the swim trunks, basketball shorts are not permitted. Girls must have a lycra based swimsuit. All swimsuits must cover the body appropriately.

I have read and understand the above and have completed this form to the best of my ability.

Signature of parent or legal guardian: _____ Date: _____

For more information please contact The CC Woodson Recreation Center 596-3710 or via email: tballew@cityofspartanburg.org

