Child's name:		DOB:	DOB:		
Second child:		DOB:			
Third child:		DOB:			
Parent(s)name(s):		Phone:			
Address:		email:			
Health inforr	mation (any concerns or s	pecial, developmental needs)			
Referred by	·				
My child is:					
	_ a non swimmer				
	goes under and plays only				
	Swims forward 10 feet (dog paddle head up)				
	Swims head down under the water 10-20 feet				
	_ Needs stroke work but	s a confident swimmer			

If you are unclear about what level your child would be this summer call Diana Perry (210) 381-4308. I return calls in the evenings. Cost of swim lessons \$300 per child for 30 minute classes. Ratios are 1:4. Fees need to be paid in advance and are non-refundable. They are transferrable to another session (space available) or another swimmer, or to scholarships.. Please make checks payable to **Diana Perry**. Venmo available @**Diana-Perry-37**. Scheduling will be on first come first-serve basis. Please indicate many flexible choices for dates and times.

Select preferred dates and times. Please indicate any flexible choices for dates/times.

April 8-19 _ 8:30 ______ 9:00 _____ 9:30 _____ 10:00 ____ 10:30 ____ 11:00 _ 8:00 ____ 1:00 ____1:30 ____2:00 ___2:30 ____3:00 ____3:30 _____4:00 _____4:30 ____ April 22-May3 8:00 _____ 8:30 ____ 9:00 ____ 9:30 ____ 10:00 ____ 10:30 ___ 11:00 1:00 ____1:30 ____2:00 ___2:30 ____3:00 ____3:30 _____4:00 _____4:30 ____ May 6-17 8:00 _____ 8:30 ____ 9:00 ____ 9:30 ____ 10:00 ___ 10:30 ___ 11:00 ____ 1:00 ___ 1:30 ___ 2:00 __ 2:30 ___ 3:00 ___ 3:30 ____ 4:00 ____ 4:30 ___ May 20-31 __ 8:30 ______ 9:00 _____ 9:30 _____ 10:00 _____ 10:30 _____ 11:00 _ 8:00 ____ 1:00 ____1:30 ____2:00 ___2:30 ____3:00 ____3:30 _____4:00 ____4:30 ____ June 3-14 9:00 _____ 9:30 _____ 10:00____ 10:30____ 11:00____ 1:00 ____ 1:30___ 8:30 2:00____2:30_____3:00_____3:30 ______4:00 ______4:30 _ June 17-28 8:30 _____ 9:00 ____ 9:30 ____ 10:00 ___ 10:30 ___ 11:00 ___ 1:00 ___ 1:30 _ 2:00____2:30_____3:00_____3:30 ______4:00 ______4:30 _____ **July 15-26** _ 9:00 _____ 9:30 _____ 10:00____ Second:30____ 11:00____ 1:00 ____ 1:30___ 8:30 2:00____2:30____3:00_____3:30 ______4:00 ______4:30 ____ July 29-Aug 9 8:30 _____ 9:00 ____ 9:30 ____ 10:00 ___ 10:30 ___ 11:00 ___ 1:00 ___ 1:30 ___ 2:00____2:30____3:00____3:30 ____4:00 ____4:30 ____ August 12 -23 8:30 _____ 9:00 ____ 9:30 ____ 10:00 ___ 10:30 ___ 11:00 ___ 1:30 ___ _2:30_____3:00_____3:30 ______4:00 ______4:30 ___ September 2-13 8:30 _____ 9:00 ____ 9:30 ____ 10:00 ___ 10:30 ___ 11:00 ___ 1:00 ___ 1:30 ___ 2:00____2:30_____3:00______3:30 _______4:00 _______4:30 ______ September 16-27 9:00__ 9:30 __10:00__ 10:30__ 11:00__ 1:00 1:30 ___ 2:00 __ 2:30 __ 3:00 __ 3:30 __ 4:00_ 4:30 __ September 30-October 11 9:00 ___ 9:30 ___ 10:00 __ 10:30 __ 11:00 __ 1:00__ 1:30 ___ 2;00__ 2:30 __ 3:00_ 3:30 __ 4:00 ___ 4:30

WAIVER, RELEASE OF LIABILITY, AND INDEMNITY AGREEMENT

Notice: This is a legally binding contract. In consideration of me and my child being permitted by Diana Perry. to participate in its swimming program, to use its facility and/or to participate in any program offered by Diana Perry., including swim training, camps, and the like, I agree to the following waiver and release and I make the following representations:

l,	, am the parent, legal gu	uardian, or designated water guardian of			
the minor child named	, age	My minor child and I want to participate			
in the <i>Good Swim Swimming Program</i> operated by Diana Perry.					

I agree to abide by Diana Perry's rules and conditions and to abide by all rules, provisions, and safe guards.

I agree to be an attentive and engaged Water Guardian. I agree to be solely responsible for monitoring my child at all times and especially when my child is in or near the water. I understand and acknowledge that there are more swimmers participating in Good Swim swim training, camps, and the like Diana Perry, that Diana Perry cannot monitor or supervise my child at all times, and that Diana Perry relies on me, as a participant in the Good Swim program, to monitor and supervise my child at all times. Therefore, I acknowledge and agree that I am required to be physically present and to actively monitor and supervise my child at all times and to be especially vigilant in monitoring my child while my child is in or near any swimming pool or water.

I agree that I am solely responsible, and Diana Perry is not responsible, for monitoring me or my child for signs of danger or distress. In the event I believe my child or I am in danger or distress, I agree to immediately notify Diana Perry. I acknowledge and agree that my child or I could suffer seriously personal injuries or death in the event I do not actively monitor and supervise my child or myself at all times.

I voluntarily assume any risks with full knowledge and appreciation of the danger and risk involved. I acknowledge and agree that there are risks associated with swimming and learning to swim including serious personal injury or death. I specifically acknowledge and agree that drowning can happen nearly anywhere with standing water and drowning is a risk of participating in any Good Swim swimming program. I further specifically acknowledge and agree that I know areas near pools are often wet and slippery, wet surface can become slippery, and that slipping or falling near the pool or any at any swimming facility is a known risk of participating any program offered by Diana Perry, including swim training, camps, and the like. I further specifically acknowledge and agree that pool water may, at any given time, be unsafe and may cause illness for me or my child. With fully knowledge of the risk and appreciation of the danger and risks involved for me and my child, I voluntarily assume the risk of injury, death or property damage to me or my child.

I, FOR MYSELF AND ON BEHALF OF MY MINOR CHILD, VOLUNTARILY AND KNOWINGLY RELEASE AND FOREVER DISCHARGE AND HOLD HARMLESS DIANA PERRY HER EMPLOYEES, AGENTS, OFFICERS, DIRECTORS, VOLUNTEERS, OWNERS, LESSEES, LESSORS AND AFFILIATED ORGANIZATIONS FROM ANY AND ALL CLAIMS AND CAUSES OF ACTION IN ANY WAY RESULTING FROM 1) MY PARTICIPATION IN ANY PROGRAM OFFERED BY DIANA PERRY, INCLUDING SWIM TRAINING, CAMPS, AND THE LIKE, 2) MY MINOR CHILD'S PARTICIPATION IN ANY PROGRAM OFFERED BY DIANA PERRY, INCLUDING SWIM TRAINING, CAMPS, parties AND THE LIKE, 3) MY USE OF DIANA PERRY'S FACILITY, AND/OR 4) MY CHILD'S USE OF DIANA PERRY'S FACILITY, INCLUDING, BUT NOT LIMITED TO, 1) DEATH OR INJURY TO ME, 2) DEATH OR INJURY TO MY MINOR CHILD, AND 3) DAMAGE OR LOSS TO PROPERTY, EVEN IF CAUSED BY NEGLIGENCE OR GROSS NEGLIGENCE OF GOOD DIANA PERRY, HER EMPLOYEES, AGENTS, OFFICERS, DIRECTORS, VOLUNTEERS, OWNERS, LESSEES, LESSORS AND AFFILIATED ORGANIZATIONS. THIS RELEASE IS INTENDED TO EXCLUDE DIANA PERRY, HER EMPLOYEES, AGENTS, OFFICERS, DIRECTORS, VOLUNTEERS, OWNERS, LESSEES, LESSORS AND AFFILIATED ORGANIZATIONS FROM ANY AND ALL LIABILITY.

ON BEHALF OF MYSELF AND MY HEIRS, SUCCESSORS AND ASSIGNS, I AGREE TO NOT MAKE ANY CLAIM OR INSTITUTE ANY LAWSUIT AGAINST DIANA PERRY, HER EMPLOYEES, AGENTS, OFFICERS, DIRECTORS, VOLUNTEERS, OWNERS, LESSEES, LESSORS AND AFFILIATED ORGANIZATIONS ARISING FROM MY PARTICIPATION OR MY MINOR CHILD'S PARTICIPATION IN ANY PROGRAM OFFERED BY DIANA PERRY, INCLUDING SWIM TRAINING, CAMPS, AND THE LIKE. ON BEHALF OF MY MINOR CHILD, I AGREE THAT HIS/HER PARENTS, GUARDIANS, HEIRS, SUCCESSORS AND ASSIGNS WILL NOT MAKE ANY CLAIM OR INSTITUTE ANY LAWSUIT AGAINST DIANA PERRY, HER EMPLOYEES, AGENTS, OFFICERS, DIRECTORS, VOLUNTEERS, OWNERS, LESSEES, LESSORS AND AFFILIATED ORGANIZATIONS ARISING FROM MY PARTICIPATION OR MY MINOR CHILD'S PARTICIPATION IN ANY PROGRAM OFFERED BY DIANA PERRY, INCLUDING SWIM TRAINING, CAMPS, AND THE LIKE.

I AGREE TO DEFEND AND INDEMNIFY AGAINST GOOD SWIM INC., ITS EMPLOYEES, AGENTS, OFFICERS, DIRECTORS, VOLUNTEERS, OWNERS,

LESSES, LESSORS AND AFFILIATED ORGANIZATIONS ARISING FROM MY PARTICIPATION OR MY MINOR CHILD'S PARTICIPATION IN ANY PROGRAM OFFERED BY DIANA PERRY, INCLUDING SWIM TRAINING, CAMPS, AND THE LIKE.

GOOD SWIM REGISTRATION 2024

I grant permission for Diana Perry, her employees and volunteers to administer emergency first-aid to my child and transport him/ her to the nearest physician, hospital, or clinic if needed. Further, I agree to pay all costs associated with medical care and transportation for me or my minor child.

I represent and agree that my child is in good health and has no physical limitations which would affect my child's safe participation in the Program or my child's use of the facilities.

I understand that this release is a contract. No oral representations, statements or inducements apart from the above written agreement have been made. I expressly state that I have read, understand and am familiar with all its provisions and that I sign it of my own free will. I further expressly agree that this release, waiver and indemnification agreement is intended to be as broad and inclusive as is permissible by the laws of the State of Texas and that if any portion of this agreement is held to be invalid, it is agreed that the balance shall, notwithstanding, continue in full force and effect.

Agreed and accepted on this date:			
Printed Name of parent, legal guardian, or water guardian:			
Signature of parent, legal guardian, or water guardian:			

GOOD SWIM RULES 2024

Compliance with the *Good Swim* rules is mandatory. Failure to follow the rules may result in immediately termination of you and your child's participation in *Good Swim* swim training, camps, parties and the like. For the safety of your child, please read these rules carefully.

- 1. All parents, legal guardians and water guardians must:
 - Learn how to recognize a swimmer in trouble. An instructional video is available for viewing at: What Drowning Looks Like https://www.youtube.com/watch?v=mWsHk4ORlqM
 - Assign an adult Water Guardian whose only responsibility is to watch children who are in, near, or around water.
- 2. All children must be monitored by an attentive and engaged water guardian at all times.
 - If the assigned adult Water Guardian needs a break, the responsibility of watching the children must be assumed by another adult Water Guardian.
 - The role of an adult Water Guardian differs from that of a lifeguard. The Water Guardian's role is to watch and PREVENT emergencies. A lifeguard is trained to rescue in the event of an emergency.
 - Teach children who cannot swim to stay away from water unless accompanied by a qualified adult.
 A qualified adult knows how to swim, stays within arm's reach of the child, and maintains eye to
 eye contact with the child.
 - Have a phone available for emergencies. Do not talk, text or surf the internet while you on Water Guardian duty!
- 3. Running is NEVER allowed anywhere on the property.
- 4. Swimmers must be free of colds and other contagious diseases.
- 5. No hairpins, barrettes, jewelry or glasses.
- 6. No food, drink, or gum anywhere on deck or in the water.
- 7. No recreational equipment unless authorized by a lifeguard or swim trainer.
- 8. All must shower before using pool.
- 9. No spitting or blowing nose in the pool.
- 10. All children must be accompanied by an adult.
- 11. No running, pushing, dunking, or rough play in pool area, showers, or locker rooms.
- 12. No diving unless directly instructed to do so by the instructor.
- 13. All injuries must be reported to the lifeguard on duty or swim trainer.
- 14. Always enter the water forward without flipping.
- 15. If you are concerned about the safety of your child or any other child, immediately and loudly notify the lifeguard or swim trainer.
- 16. Any change is your child's status must be immediately reported to Diana Perry.
- 17. You must dry yourself and your child off thoroughly before leaving the pool area or entering any *Good Swim* facility.
- 18. Any child not completely toilet trained must wear a snug fitting reusable cloth swim diaper. Dispose of all diapers in the brown trash bins.
- 19. If you bring any extra people with you, they must sign a WAIVER,
- 20. Absolutely no spray products to be used on property. If you feel the need to use insect repellent or sun block apply it at home.

RELEASE OF LIABILITY, AND INDEMNITY AGREEMENT.

Acknowledged, agreed and accepted on this date:	
Printed Name:	
Signature:	