The Swim Center

Mailing Address
177 Stokes Drive
Stockbridge, GA 30281

Phone: 770-507-7400
E-mail: swim_center@yahoo.com
Website:
www.theswimcenter.com

Location 1– Home
5876 Wilkerson Road
Rex, GA 30273

Location 2– Barrington Academy
810 Flat Rock Road
Stockbridge, GA 30281

Detach here if you'd like to keep the contact info.

Permission to Participate

In consideration of being allowed to enter the swimming pool provided by The Swim Center the undersigned, on his or her own behalf, and/or on behalf of the participant(s) identified below, acknowledges, and appreciates and agrees to the following conditions:

I represent that I am the parent or legal guardian of the Participant(s) named below, or I have obtained permission from the parent/legal guardian of the participant(s) named below to execute this agreement on their behalf. I agree that the participant(s) named below and I shall comply with all stated and customary terms, posted safety signs, rules, and verbal instructions as conditions for participation in any party and/or program provided by The Swim Center. In addition, if I observe any hazard during our participation, I will bring it to the attention of a staff member immediately;

I am aware that there are inherent risks associated with swimming and I, on behalf of myself and the participant(s) named below, knowingly and freely assume all such risks, both known and unknown, including those that may arise of the negligence of other participants; and,

I, for myself and the participant(s) named below, and our respective heirs, assigns, administrators, personal representatives and next of kin, hereby release and hold harmless The Swim Center, LLC and all other employees and other participants, from and against any and all claims, injuries, liabilities or damages arising out of or related to our participation in any and all swimming activities.

_____/_____/___ _____
Parent/Guardian Signature Date Print Name

_____/_____/___ _____/_____/___
Participant Name Date of birth Participant Name Date of birth

_____
Address

_____ _____
Emergency Contact Phone # Email

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