

2009-2010 Private Lesson Registration Form

Please make all checks payable to Vanderbilt University

A confirmation/ informational letter will be given to you upon receipt of your registration form and payment. Private lessons are dependant upon availability. A registration form and payment is valid only when dates and times have already been confirmed with the VSS Staff. To discuss private lesson dates and times please Call 322-SWIM. After dates and times are confirmed please mail or bring in your form with check, cash, or money order to the Office of Campus Recreation at the Student Recreation Center, Monday-Friday from 8:30AM-5:00PM. (Credit Cards are not accepted).

Swimming skills are difficult to master. It may require multiple sessions of lessons to learn to swim. You may register for more than one session at a time.

Parent or Adult Participant Name(s) _____
 Address _____ City and Zip _____
 Home Phone (_____) _____ Cell Phone (_____) _____ Work Phone (_____) _____
 E-mail Address: _____

Participant's Name	Age	Gender (M or F)	Ability Level	Lesson Dates and Times					Class Fee	
				Lesson 1	Lesson 2	Lesson 3	Lesson 4	Lesson 5		Time
1.										\$150.00
2.										\$
Class fees must be paid at time of registration. <u>ABSOLUTELY NO REFUNDS FOR MISSED CLASSES.</u> Mail or bring registration form and payment to: Vanderbilt Swim School, c/o Student Recreation Center VU Station B #356033 Nashville, TN 37235									TOTAL FEE →	\$

I, the undersigned and/or parent or legal guardian of the minor child under 18 years of age, consent to my child and/or myself as an adult to participate in the Vanderbilt Swim School and understand that I or my child will be engaging in physical activity during the Swim School which contains an inherent risk of physical injury. I represent that I and/or my child are in good physical condition and able to participate fully in the Swim School activities except as may be described below*. I assume the risk for myself and/or my child by voluntarily participating in the activities of the Swim School. I agree to be financially responsible for all costs and expenses related to my (or my child's) participation in the activity.

I understand and agree that Vanderbilt accepts no responsibility for my or my child's acts or the acts of others while participating in this activity.

Furthermore, in consideration of Vanderbilt allowing me and/or my child to participate in this activity, I do agree to and hereby do release, discharge, hold forever harmless and indemnify Vanderbilt and its trustees, agents, officers, servants, and employees against loss from any and all claims of ordinary negligence, demands, rights, or causes of action of any kind or nature that may hereafter at any time be made or brought by me, by anyone on my behalf, or by any other person having a legal interest therein arising from or by reason of any and all known or unknown, foreseen and unforeseen bodily or personal injuries, damages to property and consequences thereof which may be sustained by the by me in consequence of any accident or injuries on the premises of the Vanderbilt University Medical Center or in connection with the activity, except such liability or claim of liability as may result from gross or intentional negligence on the part of Vanderbilt. Said indemnification shall include, but not be limited to, court costs and attorneys' fees. Furthermore, I agree to indemnify Vanderbilt for any loss or damage to the premises, facilities, or equipment of Vanderbilt caused by me.

If I and/or my child should suffer an injury or illness while participating in this activity, or any other activity associated with the program, I authorize the employees of Vanderbilt to use their discretion to have me or my child treated at the Vanderbilt University Medical Center or transported to another appropriate health care facility that I request _____ and I hereby take full responsibility for that action.

[Name of Facility]

I further grant and convey unto Vanderbilt all right, title and interest in any and to all photographic images and video or audio recordings and all copies thereto made by Vanderbilt during my or my child's participation in the activity, including but not limited to, any royalties, proceeds or other benefits derived from such photographs or records. Please list any physical condition(s) of which the Swim School officials should be aware of on the line below.

CAUTION: READ BEFORE SIGNING

By signing below, I acknowledge that I am 18 years of age or older and understand that I am entitled to have an attorney of my own choosing to review the release prior to signing. I have read the foregoing Release in its entirety and understand that I am signing a complete and perpetual release and bar to any and all claims of ordinary negligence as defined above resulting from the participation in this activity by me or my child.

DATE: _____ SIGNATURE: _____
 (PARENT OR LEGAL GUARDIAN OR ADULT PARTICIPANT)

*ACTIVITY EXCEPTIONS OR PHYSICAL CONDITION(S): _____