

NEWTON PARKS AND RECREATION DEPARTMENT
SUMMER 2022 – NBF SWIM TEAM REGISTRATION FORM

Swimmer's Name: _____ **DOB** _____ **(M/F)**

Swimmer's Name: _____ **DOB** _____ **(M/F)**

Swimmer's Name: _____ **DOB** _____ **(M/F)**

Swimmer's Name: _____ **DOB** _____ **(M/F)**

Street City Zip

PHONE: _____

CELL: _____

(For emergency use only)

EMAIL: _____

For NBF swim team use only - **print clearly**
(Emails will only be sent to the email addresses list above)

Parental Consent Release from Liability and Indemnity for participation in the Newton Parks and Rec Swim Team.

I/We, the undersigned father and mother, or guardian(s), of _____ a minor, do hereby consent to his/her participation in the Newton Parks and Recreation Department and Newton Bluefish Swim Team Program. I/We forever RELEASE, acquit, discharge and covenant to hold harmless the City of Newton, a municipal corporation of the Commonwealth of Massachusetts and its successors, departments, officers, employees, servants, agent, of and from any and all actions caused of action, claims, demands, damages, cost, loss of services, expenses and compensation on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damages which I/We may now or hereafter have as the parent(s) or of guardian(s) of said minor, and also all claims or rights of actions or damages which said minor has or hereafter may acquire, either before or after his/her participation in the Swim Team Program. FURTHERMORE, I/We hereby agree to protect the City of Newton, Newton Bluefish, LLC and its successors, departments, officers employees, servants, and agents against any and all claims for damages, compensation or otherwise on the part of said minor growing out of, or resulting from, injury

to said minor in connection with his/her participation in the Swim Team Program and to IDENTIFY, reimburse or make good to the City of Newton or its successors, departments, officers, employees, servants and agents any loss or damage cost, including attorney's fees, the City of Newton or its representatives may have to pay if any litigations arise from said minor's participation in the Swim Team Program.

THIS FORM MAY NOT BE ALTERED.

Please list any medical problems that your son/daughter may have that the Coaches or the Newton Parks and Recreation Department should be aware of _____

_____ This form must be **fully** completed and signed before your child can participate in the swim team program. Swimmers must be Newton resident.

VACATION DATES: _____

Pictures may be posted on the team website only if you agree to have your swimmer's pictures posted, please sign below. No names will be used. Signature: _____

Disorderly conduct, including fighting; acting in an obscene manner or using obscene, abusive, threatening or intimidating language or action will not be allowed and can result in dismissal from the team. Defacing or damaging City will be cause for immediate dismissal from the team. **Signature agreeing to terms and conditions on this form is required.**

Signature Parent/Legal Guardian: _____

Date: _____

Legal Guardians first and last names

_____ \$250 each swimmer

_____ **Total payment due (No refund)**

Payment methods: Cash or check payable to NEWTON BLUEFISH, LLC. If paying by cash, please bring payment the first day of practice. (Registration fee does NOT include summer permit for Gath/Crystal Lake).

REGISTRATION DEADLINE: June 10, 2022

Mail completed form and payment by June 10 to Newton Bluefish, LLC, C/O Mary & Scott Pohlman, 3 Proctor Street, Newton, MA 02460.