

Boulding Belugas Swim School (Masters)

Membership Registration Form *September 2011 – June 2012*

Email swim4life@highspeedcrow.ca

web site www.belugaswimming.com

Please print clearly.

Name _____ **Birth Date** (D/M/Y) _____

Address _____ **Postal Code** _____

Ph # (Home) _____ (Work) _____ (Cell) _____

E-mail _____ **Sex** (M) _____ (F) _____

In case of emergency contact: _____
(Name, relationship, ph. #)

Do you have any medical conditions that the swim coach should be made aware of?

(e.g. Heart condition, high blood pressure, seizures, asthma) _____

PAYMENT - Year-end is June, 2012

3 workouts per week: \$580 (includes GST)

2 workouts per week: \$420 (includes GST)

1 workout per week \$210 (includes GST)

Start Date _____

Please make *cheques payable to Boulding Belugas Swim School or cash, hand to the coach on deck. NSF cheques will be charged \$35.*

RELEASE FROM LIABILITY

I certify that I am physically fit and have not been otherwise informed by a physician. I understand that I am responsible for monitoring my own health and exertion level while swimming and therefore participate in the Boulding Belugas Swim School Masters program at my own risk. I hereby waive any and all right to claims for loss or damages arising out of my participation in the Boulding Belugas Swim School Masters program.

Signature _____ **Date** _____

I give permission to Boulding Beluga Swim School to use my photo and/or name on the website or on any other material, for the promotion of BBSS.

Signature _____ **Date** _____

For Office Use Only:

MSM # _____

Other payments: _____

