

## SWIMMING REGISTRATION FORM

**Participant's Name:**

Last	First
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Date of Birth (Day/Month/Year)

M / F

**Parent/Guardian's Name:**

Last	First
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**Mailing Address:**

Street #	Street Name	City	Province	Postal Code
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**Local Address:**

Lake	Fire Route #	Civic #
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**Contact Information:**

Home Telephone	Cottage/Local Telephone	E-mail Address
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**Last Level Successfully Completed:**

	Red Cross	Lifesaving Society	Other
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**Level Requested:**

	Red Cross Level	Teen Program	Lifesaving Society Bronze Level
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**Session Dates:** \_\_\_\_\_ July 2 - 12    \_\_\_\_\_ July 16 - 26    \_\_\_\_\_ July 30 - August 9

**Fees:** \_\_\_\_\_ \$145.00 (plus HST = \$163.85) for Pre-School and Swim Kids levels 1 – 5  
 \_\_\_\_\_ \$175.00 (plus HST = \$197.75) for Swim Kids levels 6 – 10; Teen Program  
 \_\_\_\_\_ \$325.00 (plus HST = \$367.25) for Bronze Medallion and Bronze Cross (First Aid Awards are included in these programs)

**Payment can be made by e-transfer or by cheque. Cheques can be made payable to HARLES MANAGEMENT INC.**

**Please mail cheques to 29-FR 245, Trent Lakes, Ontario K0L 1J0**

**Medical Conditions:**

Does the Participant have any medical conditions or other disabilities that we need to be aware of? (Please note emergency plan if necessary – i.e. Epi-pen, puffers, etc.)

**Allergies (Please list):**

Epi-Pen \_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_ Asthma    \_\_\_\_ Diabetes    \_\_\_\_ Heart Condition    \_\_\_\_ Ear Infections    \_\_\_\_ Seizures

**Other (please describe)**

Is there any reason the Participant should not undertake physical exertion? \_\_\_\_ Yes \_\_\_\_ No

Does the participant wear/carry Medical Alert identification? \_\_\_\_ Yes \_\_\_\_ No

(If Yes, what is written on it?)

Should it become necessary for the Participant to have medical care, I/we hereby give permission for Lori Harper to use her best judgement in obtaining the best service for the above registered Participant. I/We understand that any cost will be my/our responsibility. I/We understand that in the event of illness or accident, I/we will be notified as soon as possible.

**Signature of Parent/Guardian**

**Dated**

(or Participant if 18 years or older)

1. Class times to be determined based on number of Participants and Class Sizes
2. This Registration is only valid upon receipt of full payment along with the completed and signed Release and Indemnity Form.

# Release and Indemnity

(Parents/Guardians Of a Participant under 18 years of age)

Where As

A. Harles Management in association with Lori Harper and Little Gull Marina carries on the business of a Swim School from approximately June 30, 2019 to approximately August 31, 2019, providing swimming lessons and water activities to adults as well as children under the age of 18 years both in the water and on land, at the following locations (collectively, the "Locations") (i) in waters in and around Mississagua Lake and neighbouring lakes and (ii) at the property and lake front of Little Gull Marina RR# 1 Buckhorn, Ontario.

Both parties to initial \_\_\_\_\_

B. The Undersigned hereby warrants and certifies to be the custodial parent of, or the legal guardian of:

\_\_\_\_\_  
(name of "Participant")

C. The Undersigned has entered into an agreement with Harles Management and Lori Harper for the enrolment and participation of the Participant in the Swim School at the above Locations **on the following dates:**

\_\_\_\_\_  
\_\_\_\_\_

**D. PARTICIPATION IN SWIMMING AND SUCH OTHER RECREATIONAL ACTIVITIES INVOLVES POSSIBLE RISKS, BOTH KNOWN AND UNKNOWN, INCLUDING, BUT NOT LIMITED TO INJURY, SERIOUS INJURY, BODILY HARM, DISABILITY, DEATH, AND DAMAGE TO OR LOSS OF PERSONAL PROPERTY,**

**NOW THEREFORE, IN CONSIDERATION** of the enrolment and participation of the above Participant in the Swim School, I the Undersigned on my own behalf and on behalf of any other parent or legal guardian of the Participant, our heirs, estate trustees, executors, administrators and/or any legal or person representatives, successors and assigns:

- RELEASE AND FOREVER DISCHARGE** Lori Harper, Harles Management, Little Gull Marina and any/all owners, officers, directors, lessees, licensees, and/or occupants of the above-specified businesses and Locations, their respective agents and employees, and all of their respective heirs, estate trustees, executors, administrators, successors and assigns (collectively, the "**Releasees**"), of and from all actions, causes of action, suits, proceedings, demands, expenses, liabilities, costs, and claims for damages or losses of every kind, wherever and howsoever arising, including but not limited to claims for negligence, arising out of, in connection with, or in any way related to the participation of the Student in the Swim School;
- UNDERTAKE AND AGREE** not to take any steps or initiate any proceedings against any person, partnership, corporation, or other such entity which might be entitled to claim contribution, indemnity or other relief over and against any or all of the Releasees, under the provisions of any statute or otherwise, with respect to any matters described in paragraph 1 of this Release and Indemnity;
- AGREE TO INDEMNIFY, PROTECT AND SAVE HARMLESS** the Releasees of and from all actions, causes of action, suits, proceedings, demands, expenses, liabilities, costs and claims for damages or losses of every kind, whenever and howsoever arising, including but not limited to claims for negligence or gross negligence, arising out of, in connection with, or in any way related to the participation of the Participant in the Swim School;
- ACKNOWLEDGE AND DECLARE** (i) I give this Release and Indemnity voluntarily as a condition of Participant being permitted to participate in the Swim School; (ii) I have had adequate opportunity to read and consider the terms of this Release and Indemnity and to obtain such legal advice or other advice in regard to it as I consider advisable; and (iii) I fully understand the terms of the this Release and Indemnity; and
- AGREE** that this Release and Indemnity shall enure to the benefit of the Releasees, and shall be binding upon the Undersigned, on any other parent or legal guardian of the Participant and on our respective heirs, estate trustees, executors, administrators and/or legal and personal representatives, successors and signs.

ACCEPTED AND AGREED ON THIS THE \_\_\_\_\_

DAY OF \_\_\_\_\_, 2019

SIGNED IN THE PRESENCE OF:

\_\_\_\_\_  
**Name of Parent/Guardian**  
(Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
**Witness Name**  
(Please Print)

\_\_\_\_\_  
Signature