



# STEP INTO SWIM ENROLLMENT AND CONSENT FORM

<b>Child's first name:</b>		<b>Child's last name:</b>
<b>Child's gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-Binary <input type="checkbox"/> prefer not to identify <input type="checkbox"/> Other Identity:		<b>Child's birth date (mm/dd/yyyy):</b>
<b>Name of parent/caregiver:</b>		<b>Address:</b>
<b>Zip code:</b>	<b>Phone:</b>	<b>Email:</b>
<b>Emergency contact:</b>		<b>Emergency phone:</b>
<b>Number of adults and children in your household (including this child):</b>		
<b>Is your child new to the Y (i.e., has never participated in a Y program before)?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Child's race/ethnicity (optional):</b> <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Middle Eastern or North African <input type="checkbox"/> Native American, Indigenous American or Alaskan Native		<input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races/ethnicities <input type="checkbox"/> Other Identity, please specify <input type="checkbox"/> Prefer not to identify
<b>How did you hear about this program?</b> <input type="checkbox"/> Y staff member/volunteer <input type="checkbox"/> Friend/family member/word of mouth <input type="checkbox"/> Mailing/email communication <input type="checkbox"/> Poster/flyer/Y event <input type="checkbox"/> Y's website		<input type="checkbox"/> Media (TV, Web, radio, print, etc.) <input type="checkbox"/> School <input type="checkbox"/> Community-based organization <input type="checkbox"/> Other, please specify:

I attest that if without this grant, I would not be able to enroll my student's in Lessons \_\_\_\_\_



SCAN TO  
DETERMINE  
YOUR STUDENT'S  
LEVEL

LEVEL \_\_\_\_\_

THANKS TO STEP INTO SWIM, WE ARE  
ABLE TO OFFER LESSONS AT NO COST.  
WE ARE INCREDIBLY GRATEFUL FOR  
THIS OPPORTUNITY TO SERVE OUR  
COMMUNITY.

Please complete back side of enrollment and consent form



## YMCA SWIM LESSON GRANT ENROLLMENT AND CONSENT FORM

### CONSENT TO PARTICIPATE IN DATA COLLECTION

Your local YMCA, Step Into Swim, and YMCA of the USA collect data and evaluate our programs to see what we are doing well, to identify areas of the program that we can improve, and to make sure that the participants we serve are benefitting from this program. Participant demographics and attendance will be collected as part of participation in this program and will be shared with our program funders.

### WHAT YOU WILL BE ASKED TO DO

For evaluation purposes, we ask your permission to use your child's swim skills assessment results, which is completed by the YMCA swim instructor at the beginning and end of the swim lesson session for program evaluation purposes.

### KEEPING YOUR INFORMATION CONFIDENTIAL

All collected data for this project will be accessible only to the approved and trained researchers and authorized staff. Y-USA plans on keeping this data indefinitely, in order to identify trends in program participation, fidelity, quality, and outcomes over time.

We will not use your child's name in any report or publication; rather, your or your child's data will be aggregated with other program participants. This data may be included in local, regional and national reports; other publications; and submitted to funder or potential funders.

There is a very small risk that confidential data will be compromised. We will minimize this risk by ensuring that only approved local Y and Y-USA staff involved in the program have access to this information.

### PAYMENT

You will not be paid for providing this data.

### LEGAL RIGHTS

You will not lose any of your legal rights by signing this consent form.

### AGREEMENT TO SUBMIT DATA

I have read and understand this consent information.

Printed name of Parent(s)/Caregiver(s): \_\_\_\_\_

\_\_\_\_\_  
Parent/caregiver signature

\_\_\_\_\_  
Printed Name of Child

\_\_\_\_\_  
Date

## Minor Participant Waiver, Release, Indemnification of All Claims & Covenant Not to Sue

PLEASE READ CAREFULLY. THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS AND IS LEGALLY BINDING. BY SIGNING THIS AGREEMENT, YOU ARE RELEASING CLALLAM COUNTY YMCA INC d/b/a OLYMPIC PENINSULA YMCA (hereinafter, "YMCA") FROM ALL LIABILITY AND FOREVER GIVING UP ANY CLAIMS THEREFORE.

### **Assumption of Risk**

I warrant that I have legal capacity as parent/guardian of the minor named below (f'Minor'), and in that capacity, I acknowledge and agree that any use of YMCA facilities, services, equipment and premises ('Facilities') and any participation in YMCA programs and activities (f'Programs') comes with inherent risks including, but in no way limited to: (1) moderate and severe personal injury, (2) property damage, (3) disability, (4) death, and (5) sickness or disease, communicable or otherwise. I voluntarily, for myself and Minor, accept and assume full responsibility for these risks as well as any and all other risks of the use of Facilities and participation in Programs. I agree that I have full knowledge of the nature and extent of all such risks and am not relying on all such risks being described in this document.

### **Waiver, Release, Indemnification & Covenant Not to Sue**

In consideration of Minor's use of Facilities and participation in Programs, I, in my legal capacity as parent/guardian of Minor, agree on behalf of myself and Minor that YMCA, its officers, directors, agents, employees, volunteers, insurers and representatives (f'Releasees') will not be liable for any personal injury, property damage, disability, death, sickness or disease, communicable or otherwise, incurred by Minor, however occurring including, but not limited to, the negligence of Releases. I understand that Minor and I will be solely responsible for any loss or damage, including personal injury, property damage, disability, death, sickness, or disease, communicable or otherwise, sustained from the use of Facilities and participation in Programs.

I further agree, in my legal capacity as the parent/guardian of Minor, on behalf of Minor, myself, and any and all legal successors and proxies, to release and HEREBY DO RELEASE, WAIVE AND COVENANT NOT TO SUE Releases from any causes of action, claims, suits, liabilities or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which Minor, myself, and any and all legal successors and proxies may have, now or in the future, against Releases on account of personal injury, property damage, disability, death, sickness, or disease, communicable or otherwise, or accident of any kind, arising out of or in any way related to the use of Facilities or participation in Programs, whether that participation is supervised or unsupervised, however the injury or damage occurs, including, but not limited to, the negligence of Releases.

In further consideration of the use of Facilities and participation in Programs, I personally and in my legal capacity as parent/guardian of Minor, agree on behalf of myself and Minor to INDEMNIFY AND HOLD HARMLESS. Releases from any and all causes of action, claims, demands, losses, suits, liabilities or costs of any nature whatsoever, including claims of negligence, arising out of or in any way related to the use of Facilities and participation in any Program.

This Waiver, Release, Indemnification of all Claims & Covenant Not to Sue, shall be in full force and effect hereafter and is a condition precedent to entry and access to the Facilities and Programs.

Printed Name/ Relationship to Minor:

Signature: \_\_\_\_\_

Date \_\_\_\_\_

## **PHOTO AND VIDEO/AUDIO RECORDING RELEASE**

I am 18 years of age or older and, if not, my Mother/Father/Legal Guardian has also signed below. For my participation in activities to be conducted by the Olympic Peninsula YMCA, I hereby give my permission and consent, now and for all time, to Olympic Peninsula YMCA and collaborating third parties to make, reproduce, edit, broadcast or rebroadcast any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account of my experience within said activities, for publication, display, sale or exhibition thereof in promotions, advertising, education and legitimate business uses without any compensation to, and/or claim, by me. I may, or may not be, identified in such reproductions; however, I shall not be stated by name to have endorsed any particular commercial products or commercial services.

I further agree to the following:

- Any video film, footage, sound track recordings, and photo reproductions of me and/or my narrative account of my experience during said activities, I authorize, according to this Release, shall belong to the Olympic Peninsula YMCA and collaborating third parties. Therefore, they will have full right of disposition of any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account of my experience within said activities;
- Any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account of my experience within said activities will not be subject to any obligation of confidentiality and may be shared with and used by the Olympic Peninsula YMCA and collaborating third parties;
- Olympic Peninsula YMCA and collaborating third parties collaborating shall not be liable for any use or disclosure to a third party of any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account of my experience; and
- Olympic Peninsula YMCA and collaborating third parties shall exclusively own all known or later existing rights to worldwide and shall be entitled to the unrestricted use any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account of my experience for any purpose without compensation to me.

I agree that my consent and this release are irrevocable. I hereby release and discharge Olympic Peninsula YMCA and collaborating third parties from any and all claims in connection with the uses and reproductions, any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account of my experience as described herein.

I am the Legal Guardian of \_\_\_\_\_. For the consideration contained herein, I hereby consent to the foregoing on behalf of my minor child.

Signature of Mother/Father/Legal Guardian:

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