

Town of Lisbon Swimming Lessons Registration Form

For ages 2 to 14 at Lisbon Beach

\$25 per person or \$50 per family

Please make checks payable to Town of Lisbon. Return Registration Forms and payment to the Lisbon Campground Office or the Town Clerk's Office by **July 5, 2024**.

Lessons start July 08-August 9, 2024.

Participants:

1. Name: _____ DOB: _____

2. Name: _____ DOB: _____

3. Name: _____ DOB: _____

4. Name: _____ DOB: _____

5. Name: _____ DOB: _____

6. Name: _____ DOB: _____

Parent Contact 1: _____ Phone _____

Parent Contact 2: _____ Phone _____

Address _____

Email _____

Allergies/Medical Conditions _____

Permission Slip/Release Form

I, the undersigned, grant permission for my child/ren to participate in swimming lessons sponsored by the Town of Lisbon ("Town") whether occurring on its premises or elsewhere. In consideration of participation in any such activity, the undersigned, his/her personal representatives, heirs, and/or assigns, executors and administrators agree to be legally bound to the terms and conditions hereinafter set forth; I hereby give our consent and approval for the participation of the applicant/s in the program conducted by the Town of Lisbon and do hereby:

1. Release, Discharge, and Covenant Not to Sue the Town, its Board, Officers, Employees, Volunteers, and/or Agents from any and all claims for personal injury or property damage, except those resulting from the Town's negligence, arising out of participation in any such sport, activity, program or event, and further agree to hold harmless the Town from any claims,

judgements or expenses the undersigned may incur by participation in the described activity.

2. Understand that participation in the described activity or sport involves danger and risk of injury. The inherent danger is understood and voluntarily assumed.

3. Acknowledge that the undersigned is aware of equipment safety regulations and will comply with each regulation **ASSUMING ALL RISK** for himself/herself and all liability to others for failure to do so. No oral representations or inducements have been made prior to signing this agreement. If any portion of this agreement is held invalid, it is agreed that the balance thereof shall continue in full legal force and effect. **I HAVE READ THIS DOCUMENT AND UNDERSTAND THAT IT IS A RELEASE OF CLAIMS ON THE CONDITIONS SET FORTH ABOVE. I UNDERSTAND AND ASSUME ALL RISKS INHERENT IN THIS ACTIVITY ON BEHALF OF MY CHILD/REN OR IN MY CAPACITY AS PARENT AND/OR LEGAL GUARDIAN FOR THE PARTICIPANT/S ABOVE.**

Signed: _____

Date: _____

Payment Received: Cash _____ Check # _____