



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Fall/Winter Family Swim for Life Program, sponsored by Quad/Graphics
Program Application Deadline is a minimum of 1 week prior to program session week.

Free swim program for the entire family.

Family definition: One adult or two adults in a committed relationship,
& dependent children less than age 19, all residing in the same household.



**Session meets for 4 consecutive evenings, Monday-Thursday.
Family lesson from 6:30-7:00 pm and free swim from 7:00-7:30 pm.**

Session your family is applying for (select top 2 choices – label 1st and 2nd)
Week of: 10/29 11/5 11/12 11/26 12/3 12/10 12/17 1/7 1/15

Primary Adult Information:

First Name: _____ Last Name: _____ Y Member Y N
Birthdate: _____ Gender: Male Female
Address: _____ City: _____ State: _____ Zip: _____
Primary Phone: _____ Cell/Other Phone: _____
Email address: _____
Emergency Contact (different than Primary Adult): _____ Emergency Phone: _____

Second Adult and/or Program Participant Information #2:

First Name: _____ Last Name: _____ Y Member Y N
Birthdate: _____ Gender: Male Female

Program Participant Information #3:

First Name: _____ Last Name: _____ Y Member Y N
Birthdate: _____ Gender: Male Female

Program Participant Information #4:

First Name: _____ Last Name: _____ Y Member Y N
Birthdate: _____ Gender: Male Female

Program Participant Information #5:

First Name: _____ Last Name: _____ Y Member Y N
Birthdate: _____ Gender: Male Female

Program Participant Information #6:

First Name: _____ Last Name: _____ Y Member Y N
Birthdate: _____ Gender: Male Female



Please indicate below why your family would benefit from the Family Swim for Life Program:

Please attach an additional sheet of paper if you need more space.

Family Swim for Life Program, sponsored by Quad/Graphics Waiver, Release, & Indemnification Agreement

In consideration of my participation in the activities and programs conducted by the Fond du Lac Family YMCA at the Fond du Lac Family YMCA I, the undersigned participant, agree to release and on behalf of myself, my heirs, representatives, executors, administrators, and assigns, HEREBY DO RELEASE the Fond du Lac Family YMCA, its officers, agents, and employees from an causes of action, claims, or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which I, my heirs, representatives, executors, administrators and assigns may have, now or in the future, against the Fond du Lac Family YMCA on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to the use of Fond du Lac Family YMCA’s facilities/equipment or participation in programs or activities conducted by the Fond du Lac Family YMCA whether that participation is supervise or unsupervised, however the injury or damage occurs, including, but not limited to the negligence of the Fond du Lac Family YMCA, its officers, agents, and employees. **Initial Here:** _____

In consideration of my participation in the activities and programs conducted by the Fond du Lac Family YMCA, I, the undersigned participant, agree to INDEMNIFY AND HOLD HARMLESS the Fond du Lac Family YMCA, its officers, agents and employees from any and all causes of action, claims, demands, losses, or costs of any nature whatsoever arising out of or in any way related to my participation. **Initial Here:** _____

I hereby certify that I have full knowledge of the nature and extent of the risks inherent in Family Swim for Life Program, sponsored by Quad/Graphics participation and that I am voluntarily assuming said risks. I understand that I will be solely responsible for any loss or damage, including personal injury, property damage, or death, I sustain while participating in Family Swim for Life Program, sponsored by Quad/Graphics and that by signing this agreement I hereby release the Fond du Lac Family YMCA, its officers, agents and employees of all liability for such loss, damage, or death. I further certify that I am in good health and that I have no conditions or impairments which would preclude my safe participation in the activities and programs conducted by the Fond du Lac Family YMCA. **Initial Here:** _____

Photo/Talent Release: I hereby irrevocably release consent at the Fond du Lac Family YMCA and its agents to use my photograph/likeness/voice/video, as it pertains to my participation with the YMCA, in any manner for promotional efforts without expectation of any reimbursement in connection with its use. **Initial Here:** _____

I hereby acknowledge that I have read this document in its entirety and fully understand the above.

_____ / ____ / ____
Parent/Guardian Signature Date