ACKNOWLEDGEMENT OF POLICY

Fox Swim	Club	

I acknowledge that I have received, read and un	nderstood the Minor Athlete Abuse Prevention
Policy and/or that the Policy has been explained	d to me or my family. I further acknowledge and
understand that agreeing to comply with the con	ntents of this Policy is a condition of my
membership with	(USA Swimming member club).
Name	
Name:	
Signature:	
Date:	