

## **Greater Morristown YMCA**

FOR YOUTH DEVELOPMENT FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

## DOLPHINS

I acknowledge that I have received, read and understood the Minor Athlete Abuse Prevention Policy and/or that the Policy has been explained to me or my family. I further acknowledge and understand that agreeing to comply with the contents of this Policy is a condition of my membership with The Greater Morristown YMCA Dolphin Swim Team.

Parent/Guardians		
Name:	Name:	Name:
Signature:	Signature:	Signature:
Date:	Date:	Date:
Name:	Name:	Name:
Signature:	Signature:	Signature:
Date:	Date:	Date:
Swimmers		
Name:	Name:	Name:
Signature:	Signature:	Signature:
Date:	Date:	Date: