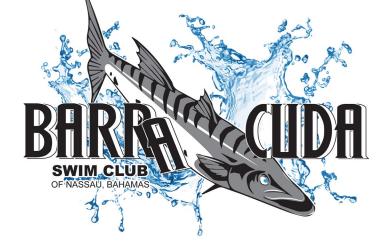


BARRACUDA SWIM CLUB MASTERS SWIMMING – 2018/19 SWIM SEASON

	И D		
PHONE:			EMAIL:
	ICY CONTACT I		
			RELATIONSHIP:
·	-		we should be aware of as you start training.
SCHEDULI	E:		
MONDAY	7:00 – 8:00 P .M.	AT BKKAC	
TUESDAY	7:00 – 8:00 P.M.	AT BKKAC	
THURSDAY	7:00 – 8:00 P.M.	AT BKKAC	
	OFFERING 3 SESSION		
	•		O TO THURSDAY, DECEMBER 20 (45 WORKOUTS)
	•		TO THURSDAY, APRIL 18 (48 WORKOUTS)
SPRING/SUMIN	MER SESSION - MO	NDAT, APKI	IL 29 TO THURSDAY, AUGUST 1 (42 WORKOUTS)
There may be o	cancellations on natior	nal holidays, in th	he case of coaches being off island or other unforeseen circumstances (like weathe
contact.			cated by WhatsApp as soon as we know. Please make sure we have your up to date
COST:			
	ON. PAYMENT BY CA		JE (BARRACUDA SWIM CLUB).
QUESTION	NS:		
JEFF SLATER,	, HEAD COACH, BAR	RACUDA SWIM	1 CLUB 242.427.7946 or barracudacoachjeff @gmail.com
SIGNATURE: _			DATE:





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I, the undersigned agree that I will not hold The Barracuda Swim Club, and its coaches, instructors, members, associates and anyone acting on its behalf, responsible or liable to the above-mentioned swimmer, his or her heirs, executors, or representative for any and all injury, damages, accidents, deaths, claims, actions to cause of action whatsoever to the above-mentioned swimmer's person to property arising or in connection with the use of these facilities. The undersigned further releases The Barracuda Swim Club, Swim coaches, instructors, members, associates and anyone acting on its behalf from any injuries that may results from any pre-existing condition or impairment that the swimmer may possess. The undersigned acknowledges that this release is given in advance to any injury to the above-mentioned swimmer and that includes any future injuries, damages and losses. I acknowledge and accept that the above-mentioned swimmer is participating in this program and all its activities related thereto is voluntary and entirely at the above-mentioned swimmer own risk.						
OLOMATURE	DATE					
SIGNATURE:	DATE:					
Barracuda may document Masters swim activities usin	ng photo and/or video which will be use	d for promotional purposes. I understand that				
signing this waiver indicates agreement to the terms a	and conditions.					
SIGNATURE:	DATE:					
FOR OFFICIAL USE ONLY:						
BANK OF CHECK	CHECK NUMBER	CHECK AMOUNT				

CASH AMOUNT



