



Acknowledgement of Minor Athlete Abuse Prevention Policy (MAAPP)

I acknowledge that I have received, read and understand 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 Renegade Aquatics.

Name:

Signature:

Date:

Please drop off at the pool, or email signed form to:

jpm_vc@hotmail.com