

**WRITTEN ACKNOWLEDGEMENT OF SAFE SPORT MAAPP POLICY**

Must review annually with all club member.

***INSERT YOUR TEAM NAME***

***AND LOGO HERE***

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 \_\_\_\_\_  
 \_\_\_\_\_(USA Swimming member club).

NAME	SIGNATURE	DATE