## Michelle's Mermaids and Mermen

2021 Registration, Waiver and Consent Form\*

1. Student Name		DOB	
2. Student Name			
Important information about your	child(ren) that may be help	ful during swim lessons.	
Address	City	Zip	
Mother (or Guardian)		Phone	
Email	Preferred Con	tact Method	
Father (or Guardian)	(or Guardian) Phone		
Email	Preferred Contact Method		
Emergency Contact	Phone	Relation	
The staff of Michelle's Mermaids and the risks and hazards involved in the sand accident insurance that you conside you release Michelle's Mermaids and may be sustained by your child while  Payment of the swim fee is due once payment is received (by concept and seed once payment is received (by concept and a swimp additional lessons may be scheeled. In the event of rain, or other cide to be cancelled. In that event, the should a pool not be in good concept and a pool not be in good concept and a pool in the pool, and a pool in the pool in the pool, and a pool in the pool in the pool, and a pool in the pool in t	Mermen is committed to make port of swim. You acknowledge adequate for the protection. Mermen and its employees frattending Michelle's Merman end prior to each lesson. We are cash or Zelle). It was a standard to	aking sure students and pare edge that you have medical, on of your child(ren). By signom all claims on account of ids and Mermen swim lesson and Mermen swim lesson and evaluation is trol, there may be times where the lesson will be rescheduled the pool has been appropriately wiedge that you have read,	health, hospital gning this waiver, of any injury that ons.  ecific lesson time for the lesson will Mermen staff to complete, hen a class needs to ed. If a child has all leave the water. Eately cleaned.
Parent (or Guardian) Signature*: _		Dotor	
*Please print, sign and return this for	m with your first lesson.	Date	