

# JumpStart 2009 Registration Form – Please fill out a separate form for each swimmer

Please print clearly, complete all portions and return along with your check made payable to Oswego 308.

JumpStart runs from April 20th to May 23rd

## Return to:

Deryl Leubner  
ATTN: JumpStart  
1525 Harvey Road  
Oswego, IL 60543

### PLEASE CHECK THE BOX NEXT TO OPTION YOU ARE REGISTERING FOR:

- Option #1 – Monday & Wednesday 7:45-8:45pm (10 practices) = \$100  
 Option #2 – Saturdays 10:15-11:15am (5 practices) = \$50  
 Option #3 – Monday & Wednesday & Saturday (15 practices) = \$145

Swimmer's Full Name (First, Middle, Last)

Age

Birthdate (MM/DD/YYYY)

Frequently Check Email Address (You may include up to two email addresses)

Summer League Swim Team

Years of Summer League Experience

Parent's Name(s)

Phone #

Mailing Address

City

Zip Code

Emergency Contact

Relationship to Swimmer

Phone #

## Delta Aquatics JumpStart Policies and Release

Please read and sign the following. Please initial each paragraph

\_\_\_\_ **REFUND POLICY: NO REFUNDS.** We hire coaches based on our registration

\_\_\_\_ **MAKE-UP POLICY: WE DO NOT OFFER MAKE-UPS for illness or conflicts with other activities.**

\_\_\_\_ **POOL CLOSINGS: The pool will be closed for the following reasons:**

When a child vomits or has a bowel movement in the pool, the pool must be closed for sanitation.

**Inclement weather** - If Oswego East is closed due to bad weather there will not be any *JumpStart*. If Oswego East closes early during the school day due to bad weather all swim practices will be cancelled for that day. If conditions in the pool make it unsafe for students to be in the pool, the pool will be closed.

\_\_\_\_ **SEATING FOR PARENTS AND SIBLINGS:** Parents and siblings of *JumpStart* swimmers that wish to stay in the building during the session **must sit in the stands up above the pool.**

I agree to release, indemnify and hold Delta Aquatics and the Oswego District 308 and its officers, instructors and employees harmless from any and all liability claims, actions, judgments, damages, or injuries of every kind and nature whatsoever to the participant and/or his property arising from participation in the activity for which the participant is registering.

**By signing below I agree that I have read and understand and will abide by the above JumpStart policies.**

Parent/Guardian Name: \_\_\_\_\_ (Please print.)

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_