



City of Seal Beach Lap Swim

211 8th Street, Seal Beach, CA 90740
Office (562) 431-2527 ext. 1344 Fax (562) 430-3498



Participants Name: _____

Address _____ City _____ Zip _____

Home Phone _____ Mobile Phone _____

Email: _____

16 Swims (\$49) ___ **34 Swims (\$98)** ___ **Youth-16 swim (\$32)** ___ **Annual (\$250)** ___

Recreation Swim Summer Pass

Seal Beach Resident (\$26) _____ Non-Resident (\$52) _____

RELEASE AND INDEMNIFICATION

I hereby agree to indemnify, defend and hold harmless the City of Seal Beach, its officers, employees, agents and volunteers from and against any and all claims, damages, liability, bodily injury, death, expenses, and judgments, including attorney fees, expert witness fees and court costs in any way arising from my (or my child's) participation in the program for which I am registering him/her. I understand and am familiar with the nature of the event or activity and recognize that this event or activity can be dangerous to me (or my child) and accept those dangers. In case of emergency, I give my permission for emergency medical treatment. I also give my permission to the City of Seal Beach to photograph me or my child participating in this event or activity for advertising purposes for the City of Seal Beach and acknowledge I will not receive any compensation for such use. My signature acknowledges that I understand and agree to the above conditions.

DATED: _____ SIGNATURE: _____

1. Do not enter pool if the lifeguard is not present.
2. Lap swimmers must abide by the posted rules and lifeguard direction.
3. During Adult Lap Swim, parents may not take their children in pool.
4. The Lifeguard is not allowed to watch your children or personal property.
5. No deck changes; use the changing rooms or restrooms.
6. Circle pattern is required if all lanes already have two swimmers. Lifeguards may ask you to change lanes to better accommodate swimmers being grouped according to speed
7. No Diving.
8. The Pool Office is restricted to City of Seal Beach employees only.
9. Swimmers must have current pass present each day to swim
10. No foul Language; remember the pool is located on an elementary school campus.
11. The City of Seal Beach reserves the right to revoke lap swim passes for noncompliance of pool rules or Lifeguard direction.
- 12. \$10 FOR LOST PASS REPLACEMENT**

I have read and agree to the above rules governing the City of Seal Beach Recreation Swim.

DATED: _____ SIGNATURE: _____

METHOD OF PAYMENT	
MAKE CHECK PAYABLE TO CITY OF SEAL BEACH	
<input type="checkbox"/> CHECK #: _____	
<input type="checkbox"/> CASH	
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD (NO DEBIT CARDS) TOTAL CHARGED TO ACCT: \$ _____	
CARD # <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> EXP. DATE <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	
SIGNATURE _____	TOTAL CHARGED TO ACCT: \$ _____