BCYF Mirabella Pool Swim Meet

Registration & Waiver Form

The Mirabella Pool will be hosting a swim meet on Tuesday, August 13th (6:45 pm to 7:45 pm)

NOTE: All participants must be a member of BCYF Mirabella Pool

Youth Participant: _____

Date of Birth: _____

Parent Name: _____

Parent Phone: _____

I give my child, _____, permission to participate in the BCYF Mirabella Pool Swim Meet.

CONSENT

I have read and understand the BCYF Code of Conduct. I agree that I will act in accordance with the BCYF Code of Conduct. The application is factual and complete to the best of my ability. I hereby waive and release any and all rights, causes of action, and claims for damages I may have against the City of Boston, Boston Centers for Youth & Families (BCYF), and any and all other associated individuals or organizations, for any and all personal injuries or property damage resulting from my participation in BCYF Programs.

I, the undersigned parent or guardian of {_____}, a minor, hereby consent to his/her BCYF membership and waive and release any and all rights, causes of action and claims for damages I may have against the City of Boston, BCYF, and any and all other associated individuals or organizations, arising out of any and all personal injuries or property damage which I may now or hereafter have as the parent or guardian of said minor, and also all rights, causes of action, and claims which said minor has or may acquire resulting from his/her participation in the program.

I understand the staff at BCYF Mirabella Pool/Nazzaro Center are not certified swim instructors.

I give consent for me/my child to be administered first aid and to be treated by an emergency medical technician-paramedic, nurse or physician. Any follow up medical attention may be given at a local hospital and transportation to a Boston hospital is authorized.

_____

Signature of Parent or Guardian Date