

Urbanna Swim Club Membership Application

	Membership fee	Cash/Check Discounted Fee
Multi-Generational Family, same address	\$645	\$625
Family-4 Membership (four or more)*	\$545	\$525
Family-3 Membership (three people)*	\$425	\$410
Family-2 Membership (1 adult, 1 child)	\$275	\$260
Couple Membership (two people)	\$310	\$300
Senior Couple Membership (55 and over)	\$210	\$200
Individual Membership (one adult)	\$160	\$150
Senior Individual Membership (55 and over)	\$105	\$100

* Families consist of one or two adults with dependents **under** 23 years old.

PAYMENT CAN BE MADE BY MAIL TO:

Urbanna Swim Club
P. O. Box 3242
Manassas, VA 20108

OR ONLINE AT:

www.urbannaswimclub.org

If you have any questions, please email us at info@urbannaswimclub.org

Please update your membership information.

Name(s) of Adult members: _____

Address: _____

Email: _____

Home Phone: _____ Membership Number: _____

Children's names and birthdates: _____ DOB ____/____/____

_____ DOB ____/____/____

_____ DOB ____/____/____

_____ DOB ____/____/____

_____ DOB ____/____/____

_____ DOB ____/____/____

_____ DOB ____/____/____

_____ DOB ____/____/____

Office Use: Date Application Received _____ Renewal _____ New _____

Full Payment | Payment Plan

Date(s) Payment Received _____

PLEASE INITIAL:

_____ MEDICAL RELEASE WAIVER (Required)

I certify that I am the parent or legal guardian for my child(ren). I hereby give my permission for any supervisor, coach or other team administrator associated with the Urbanna Swim Club, to seek and give appropriate medical attention for our child(ren) in the event of accident, injury, illness. I will be responsible for any and all costs associated with any necessary medical attention and/or treatment. I hereby waive, release and forever discharge Urbanna Swim Club, from all rights and claims for damages, injury, loss to person or property which may be sustained or occur during participation in Urbanna Swim Club, whether or not damages or loss is due to negligence. I hereby acknowledge that myself, my child(ren), and/or my family members is/are physically fit and capable of participation in all swim activities.

_____ LIABILITY WAIVER (Required)

By registering myself and/or my child(ren) with the Urbanna Swim Club, I agree to participate (or allow my child(ren) and family members to participate) with the Urbanna Swim Club, and hereby release Urbanna Swim Club, its directors, officers, agents, coaches, and employees from liability for any injury that might occur to myself (or to my child(ren) and family members) while participating in the Urbanna Swim Club. I agree to indemnify and hold harmless the above mentioned organizations and/or individuals, their agents and/or employees, against any and all liability for personal injury, including injuries resulting in death to me, my child(ren), family members, and/or personal guest, or damage to my property, the property to my child(ren), family members, and/or personal guest, while I (or my child(ren), family members, and/or personal guest participating in the Urbanna Swim Club.

_____ PHOTOGRAPHY WAIVER (Optional)

I hereby grant permission to the Urbanna Swim Club and associated programs, and their officers, trustees, employees, agents, students, representatives, successors, licensees and assigns (hereinafter "USC & Associates") to photograph my image, likeness, or depiction and/or that of my minor children (if applicable). I hereby grant permission to USC & Associates to edit, crop, or retouch such photographs, and waive any right to inspect the final photographs. I hereby consent to and permit photographs of me and/or those of my minor children to be used by USC & Associates to include, but not limited to, the support of educational and advertisement purposes, and in any medium, including print and electronic. I understand that USC & Associates may use such photographs with or without associating names thereto. I further waive any claim for compensation of any kind for USC & Associates use or publication of photographs of me and/or those of my minor children (if applicable).

_____ POOL RULES & CODE OF CONDUCT (Required)

I agree to abide by the USC Facility Rules & Patron Code of Conduct* while on USC property, or during participation off-site in any USC program events. Additionally, I certify I will hold any guests I invite to the quality of behavior mentioned within the document. I understand that violation of any of these rules & regulations are subject to the consequences identified in the 2019 Urbanna Swim Club Bylaws**.

*USC Facility Rules & Patron Code of Conduct will be available once approved by the Urbanna Swim Club Board of Directors, prior to the start of the season. Once the document has been approved, it will be sent via email to all registrants and made available to all prospective members through the Urbanna Swim Club website.

**2019 Urbanna Swim Club Bylaws will be available once approved by the Urbanna Swim Club Board of Directors, prior to the start of the season. Once the document has been approved, it will be available to all registrants and made available to all prospective members at the Urbanna Swim Club Pool Office.

I authorize the verification of the information provided on this form and agree that all members (applicant, spouse and children) will abide by the Urbanna Swim Club rules and regulations.

Signature: _____

USC Date: ____/____/____

Please send this completed form to Urbanna Swim Club, P. O. Box 3242, Manassas, VA 20108