

West Jordan Outdoor Swimming Pool 2017 Summer Swim Lessons

Lessons are available: Mon. – Thurs. 9:00 am –12:00 pm

***Lessons will not be held July 3rd OR 4th or July 24th, 2017.**

****Due to the possibility of inclement weather, Fridays will be used as a make-up day as needed.**

Registration Begins	Session Starts	Session Ends	Days Taught	Cost
May 27	June 5	June 15	Mon-Thurs	\$34.00
June 16	June 19	June 29	Mon-Thurs	\$34.00
June 30	July 5 *	July 13	Mon-Thurs	\$25.50
July 14	July 17 *	July 27	Mon-Thurs	\$29.75
July 28	July 31	August 10	Mon-Thurs	\$34.00
August 11	August 14 *	August 17	Mon-Thurs	\$17.00

For year round swim lessons visit Gene Fullmer Recreation Center



*Child must be at least 4 years old to register for classes.

*Due to the skills needed to pass each level, some levels may need to be taken more than once.

*Times and dates are subject to change without notice.

*We reserve the right to cancel or combine classes as needed.

*If a student misses class, we do not provide credit, refunds or make-ups.

*We avoid scheduling lessons on holidays or during school breaks when possible.



West Jordan Outdoor Swimming Pool
8125 South 2200 West, West Jordan, UT 84088
385-468-1941

slco.org/west-jordan-pool/



For inclusion opportunities for people with disabilities, contact Ashley at 385-468-1520 or ahaddow@slco.org.

RECREATION FORM

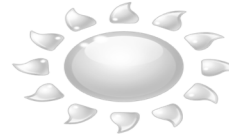
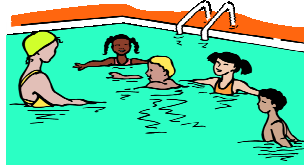
West Jordan Outdoor Pool - YOUTH SWIM LESSONS, Summer 2017

Summer Sessions:

- June 5 - June 15
 - June 19 - June 29
 - July 5 - July 13 *
 - July 17 - July 27 *
 - July 31 - Aug. 10
 - Aug. 14 - Aug. 17 *
- (Only 1 week)


YOUTH SWIM LESSONS - Summer 2017

- Level 1
- Level 2
- Level 3
- Level 4
- Level 5



Name of Participant _____

Birthday _____ Age _____ Girl Boy
 Address _____ ZIP _____ City _____ State _____
 Work # _____ Home # _____ Cell # _____ (please check preferred #)
 Parent or Guardian _____ Email (required) _____
 Emergency Contact (other than guardian) _____ Phone _____

 Check here to be contacted about inclusion opportunities for people with disabilities.

PARENTAL STATEMENT OF AGREEMENT - ASSUMPTION OF RISK, LIABILITY RELEASE AND REFUND POLICY

Assumption of Risk: I hereby acknowledge and agree that my child's participation in recreational activities involves inherent foreseeable and unforeseeable risks and hazards which may expose my child, or me, to illness, injury, or death. In consideration of my child's participation in such activities, I for myself, my child, my heirs, my executors and administrators, freely and voluntarily agree to assume and accept any and all risks to my child or myself associated with my child's participation in Salt Lake County recreational activities.

Release: In consideration of my child's participation in the Salt Lake County recreational activities, I, for myself, my child, my heirs, my executors and administrators hereby release Salt Lake County and its officers, agents, and employees from any cause of action, claim, or demand of any nature whatsoever I or my child may now have, or have in the future, against Salt Lake County on account of personal injury, property damage, death, or accident of any kind, caused by, arising out of, or in any way related to my child's participation in Salt Lake County recreational activities.

Indemnification: In consideration of my child's participation in the Salt Lake County recreational activities, I agree to indemnify and hold harmless County, its officers, agents, and employees from any and all causes of action, claims, demands, losses, or costs of any nature whatever cause by, arising out of, or in any way related to my child's participation in the Salt Lake County recreational activities. I agree that my duty to defend and indemnify the County under this Agreement includes all attorney fees, litigation and court costs, expert witness fees, and any sums expended by or assessed against the County for the defense of any claim or to satisfy any settlement, arbitration award, or verdict paid or incurred on behalf of the County arising out of or in any way related to my child's participation in the Salt Lake County recreational activities.

Refund: Refunds may only be requested in person and must be accompanied by a written request. As per Salt Lake County policy and procedures the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. No refunds shall be given after the first day of the program.

Collections: I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred for collection. I understand that any account delinquent 30 days or more will be turned over to collection.

Emergency Treatment: I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom.

Media Consent: I hereby grant permission to Salt Lake County to use my or my children's photograph, videotaped image, quotes/comments, or name for publicity and educational purposes in any and all publications and media without limit or compensation.

Name Posting: Unless otherwise indicated below, Salt Lake County is authorized to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

I do not authorize Salt Lake County to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website. _____

By signing this assumption of risk, liability release, and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure, and that I agree to its terms. If any portion of this Agreement is held to be invalid by a court of law, then it is agreed and intended that all the remainder shall, notwithstanding, continue in full force and effect.

Name of Child Participant: _____

Signature (Parent or Legal Guardian): _____ Date: _____

OFFICE USE ONLY: Till #	Amount	By	Date
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