



Adaptive Swim Club

Adults and youth with physical, visual, or intellectual disabilities are welcome to join and practice.

An adaptive aquatics instructor will lead the group through drills, stroke refinement, building endurance, skills to increase lifelong health and wellness, and the opportunity to engage in social interactions with peers.

This club has the option to swim *competitively*. Practices will teach competitive rules and work towards participating in a swim meet.

WHEN: Fridays 3:00-4:30 pm

Session 8: September 15- October 6

Session 9: October 20- November 10

WHERE: Holladay Lions Recreation Center
1661 East Murray-Holladay Road
Holladay UT 84117
385 468-1700

FEE: \$10.00

AGE: 15 and up

Register in person at Holladay Lions Recreation Center. Upon registering for this club, participant must attend an in water assessment.

To schedule an assessment please call Ivy Hausknecht (385) 468-1903 or email IHausknecht@slco.org



Swim Club members MUST be able to swim a length of the pool independently without being prompted.

The Adaptive Swim Club is not a lesson but is equivalent to a masters swim team. This club will focus on swimming strength, stamina, and stroke refinement. If you are looking for adaptive swim lessons please contact your desired pool for inclusion swim lesson opportunities and/or reasonable accommodations. We also have a swim club for children and teens with intellectual disabilities called the Otters Swim Club.

Please contact Salt Lake County Adaptive for questions/information about other adaptive opportunities at 385-468-1515



REGISTRATION FORM

Name / Nombre _____ Date: _____

PLEASE PRINT: LETRA DE MOLDE (first name / nombre) (last name / apellido)

Boy ___ Girl ___ Birthday / Fecha de Nacimiento ___/___/___ Age / Edad _____

Address / Dirección _____ City / Ciudad _____ UT Zip / Código: _____

E-mail Address / Correo Electrónico _____

Parent / Guardian Padre / Madre _____ Phone / Numero de Teléfono: _____

Work or Cell / Numero de Celular o de Trabajo _____

In emergency notify (NOT parent or guardian) / En caso de emergencia (Que NO sea los padres) _____


Phone / Numero de Teléfono: _____ Work / Cell Numero de Celular o de Trabajo: _____

Any special needs or concerns; Existen necesidades especiales de su hijo? _____

Disabilities / Discapacidad _____

Allergies / Alergias _____

Seizures / Convulsiones _____ Frequency / Frecuencia _____

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

PARENTAL CODE OF ETHICS

As A Parent I Will: Remember that the game is for the players and not for the parents. Do my very best to make this sport FUN for my child. Place the emotional and physical well being of my child ahead of any personal desire to win. Demonstrate GOOD SPORTSMANSHIP by giving POSITIVE SUPPORT and ENCOURAGEMENT to all players, coaches, officials, and recreation staff at every practice and game. Support the coaches, officials, and recreational staff with respect regardless of race, sex, creed, or ability. I will expect my child to do likewise.

Consequence for Breaking Code of Conduct: First offense you will be given a card from site supervisor and/or a verbal warning. Second offense you will be removed from the game/practice and be suspended from attending the next game/practice. Third offense you will be suspended from attending the remainder of your child's games/practice.

Signature of Parent/Guardian: _____ Date _____

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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