

# Swim Lessons

The lifeguard staff/varsity swim team at McKeesport Area High School will be offering swim lessons. The minimum age for lessons is 4 years of age.

The lessons will be held during the assigned times throughout the session unless a change is indicated by the instructors. Every attempt will be made to maintain small class sizes so that individual instruction can be provided. Due to staffing issues, there may be different instructors throughout the session. Every session will have a certified lifeguard on duty at all times to ensure participants safety.

In order to get the most out of the lessons, we ask that as parents you have your child ready for the start of the lessons, and please stay back from the water's edge. Please encourage the swimmers to follow the lifeguard and instructors directions and remain in the pool at all times.

We will try to hold lessons according to schedule as much as possible. IF any questions arise please contact Milan Kiska, program coordinator. Milan can be contacted via email: mrkiska.kiska@gmail.com or by calling (412) 664-3690 extension 2204 (Founders' Hall).

The program will cost \$45 dollars per individual. Cash or checks can be accepted. Checks made payable to MASD.

**Lesson Dates: 3/5, 3/7, 3/12, 3/14, 3/19, 3/21, 3/26, 3/28: 2019**

**7:00 to 8:00 pm**

**Name (Swimmer)** \_\_\_\_\_

**Age:** \_\_\_\_\_ **Ability:** Beginner Adv Beg Intermediate Advanced

**Has the swimmer taken swim lessons before?** \_\_\_\_\_ **If so Where?**

**Cell#** \_\_\_\_\_ **Home#** \_\_\_\_\_

**Emergency Contact: (Name and#):** \_\_\_\_\_

**Special Medical concerns:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**\*\*Please read back of paper, must be signed for participation\*\***

ACKNOWLEDGMENT OF RISK AND HOLD HARMLESS AGREEMENT

I hereby acknowledge that I have voluntarily chosen to use the McKeesport School District’s facilities, including, but not limited to, use of swimming pool, all other related facilities including all common areas, (hereinafter called “facilities”).

I understand the risks involved in the use of the facilities. I recognize that the use of the facilities and its activities involves risk of injury and I agree to accept any and all risks associated with it, including but not limited to property damage or loss, minor bodily injury, severe bodily injury, and death. I am voluntarily using the facilities with the knowledge of the risks involved and hereby agree to accept any and all inherent risks of property damage, bodily injury, or death.

In consideration of my use of the facilities and to the fullest extent permitted by law, I agree to indemnify, defend and hold harmless McKeesport School District, its officers, directors, employees, agents, volunteers and assigns from and against all claims arising out of or resulting from my use of the facilities. “Claim” as used in this agreement means any financial loss, claim, suit, action, damage, or expense, including but not limited to attorney’s fees, attributable to bodily injury, sickness, disease or death, or injury to or destruction of tangible property including loss of use resulting therefrom. In addition, I hereby voluntarily hold harmless McKeesport School District, its officers, directors, employees, agents, volunteers and assigns from any and all claims, both present and future, that may be made by me, my family, estate, heirs or assigns.

I hereby expressly agree to indemnify, defend, and hold harmless McKeesport School District, its officers, directors, employees, agents, volunteers and assigns for any claim arising out of or incident to my use of the facilities, unless claim is caused by the sole negligence or willful misconduct of McKeesport School District.

I also understand that McKeesport School District does not provide any medical or dental insurance to cover bodily injury, illness or death, nor insurance for personal property damage or loss, nor insurance for liability arising out of my negligent acts or omissions; and I acknowledge that I am completely responsible for my own insurance to cover these expenses.

I further understand that this acknowledgment of risk and hold harmless is intended to be as broad and inclusive as permitted by the laws of the State of Pennsylvania and that if any portion hereof is held invalid, I agree that the balance shall, notwithstanding, continue in full legal force and effect.

I understand and agree to follow all rules of conduct, safety rules, and time limits imposed by the McKeesport School District.

I understand and agree that, if rules and time limits imposed by McKeesport School District are not followed, that McKeesport School District may revoke its permission to use its facilities.

I attest that I am physically fit to participate in physical activities and that my medical condition to do so has been verified by a licensed physician.

I have read the above conditions and accept them as shown by my signature, and my intent to be legally bound.

I agree that this acknowledgment of risk and hold harmless is effective for as long as I use the facilities.

PARTICIPANT’S SIGNATURE (AND PARTICIPANTS GUARDIAN’S IF PARTICIPANT IS A MINOR) IS REQUIRED (ON BACK OF THIS AGREEMENT) PRIOR TO USE OF FACILITY

Student’s Name: \_\_\_\_\_

\_\_\_\_\_  
Guardians Name (print)

\_\_\_\_\_  
Guardian (signature)

\_\_\_\_\_  
Date