

# KNOW HOW TO SWIM? JOIN THE **FREE SWIM CLUB** AT THE GLENNVILLE STATE COLLEGE POOL



**Sundays beginning October 20**  
Registration open now (see form on back)

OPEN TO STUDENTS, FACULTY, STAFF, AND COMMUNITY MEMBERS

**Group 1 – Ages 6-15 – 2:00-3:00 PM**

**Group 2 – Ages 16+ – 3:00-4:00 PM**



*For More Information:*  
**Kathy.Gilbert@glenville.edu | (304) 462-6216**

# Swim Club Registration Form

Name: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Previous Swim Experience: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Check one:

- Group 1 – Ages 6-15 – 2:00-3:00 PM
- Group 2 – Age 16+ – 3:00-4:00 PM

### Waiver

I acknowledge and accept the risks inherent in the use of the Glenville State College services and swimming pool, including participation in any swimming lesson. The undersigned assumes the sole risk of injury, accident, death, loss, cost or damage for his or her person, dependent or property which might arise from the use of Glenville State College services and facilities. The undersigned further agrees that Glenville State College, its instructors, employees, servants, and agents, shall not be liable to the undersigned for any claims, demands, injuries, damages, actions or causes of action whatsoever to the undersigned's person, dependent or property arising out of or in connection with the use of the services and facilities of the Glenville State College, and further including any pre-existing physical condition or impairment.

The undersigned, his or her heirs, personal representatives, executors, and assignees do hereby release and discharge Glenville State College, its instructors, employees, servants, and agents from all claims, demands, injuries, damages actions or causes of action and from all acts of active or passive negligence on the part of the college, its servants, instructors agents or employees. The undersigned further agrees to abide by all policies and procedures of Glenville State College, and, which policies and procedures may be posted at the facility, issued orally and/or published, and which may be amended from time to time at management's sole discretion.

I have read the above statement and agree to the payment for services and policies for Glenville State College.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

*Registration Form must be submitted to Kathy.Gilbert@glenville.edu two days prior to start of course.*

How did you hear about us?

Website    Newspaper    Facebook    Family/Friend    Other: \_\_\_\_\_