



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

## Oneonta Waves Summer Skill Session Summer 2025 Wilber Pool June 30-July 31, 2025

### Participant Enrollment Information:

Child's Full Name:

\_\_\_\_\_

Address:

\_\_\_\_\_

Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Swim Level: \_\_\_\_\_

Second Child's Full Name:

\_\_\_\_\_

Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Swim Level: \_\_\_\_\_

Third Child's Full Name:

\_\_\_\_\_

Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Swim Level: \_\_\_\_\_

### Oneonta Waves Swim Team Schedule:

- Beginners: 11:30 am-12:00 pm
- Youngers: 11:30 am-12:15 pm
- Olders: 11:30 am-12:45pm

### Photography and Video Release

I give the Oneonta Family YMCA, its nominees, agents and assigns, unlimited permission to use, publish and re-publish, for purposes of advertising and trade for such use as it may determine, information and reproduction of my child's likeness (photographic or otherwise) and voice related to the child's participation in the YMCA programming, with or without identification by name.

Consent of adult or legal guardian

I consent or agree, individually and as a parent, or legal guardian of the minor named in the foregoing terms and provisions.

Parent/ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Parent/ Guardian Information:**

**Parent/Guardian 1:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_

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

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_  
**Work Phone:** \_\_\_\_\_

**Parent/Guardian 2:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_

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

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_  
**Work Phone:** \_\_\_\_\_

**Emergency Contacts:**

<b>Name:</b>	<b>Relationship:</b>	<b>Phone #</b> <small>(Please indicate Home, Cell, or Work)</small>	<b>Other phone #</b>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

**Parent/ Guardian Signature:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

**Print Parent/Guardian** \_\_\_\_\_

**Print Full Name of Child/ren** \_\_\_\_\_