

**NMSU Swim School
Registration Form: Fall 2014**

(One form per child: Please print clearly)

* Required Information

*Participant's Name: _____ Age: _____

*Parent/Guardian Name: _____

*Participant's Address: Street: _____ City: _____ State: _____ Zip: _____

*Parent/Guardian E-mail: _____

*Participant's Phone#: (____) _____

(Please clearly indicate the level and time of the lesson you are registering for)

	Level:	Time:	Price:
Fall: September 13-November 15	_____	_____ - _____	\$ _____

Current Aggie Fit Member? Yes _____ No _____
AggieFit/Lapp/NMSU ID # (if applicable) _____

Total: _____

My signature below attest to the fact that I release and hold harmless the Regents of New Mexico State University, its agents and employees from any and all liability or cause of action resulting from my child's participation in activities at the New Mexico State University Activity and Aquatic Centers. This release is binding upon my heirs and personal representatives.

X _____
Parent/Guardian Signature

****Refunds:** Refunds, in full or in part, will only be given to individuals who have met both the following conditions: (1) have paid with credit card, and (2) have provided documentation of a medical circumstance that hinders participation. Full refunds will only be given if the coordinator has received notification prior to the beginning of the session. Partial refunds will be given if the medical circumstance occurs during the session, and will be based on the number of classes missed.

Completed by staff only:

Registered By: _____

Date Registered: _____

PLEASE SIGN THE PHOTOGRAPHIC RELEASE ON THE BACK OF THIS FORM