

**NMSU Swim School  
Registration Form: Summer 2018**

(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:
Session I: May 29-June 14	_____	_____ - _____	\$ _____
Session II: June 18-July 5	_____	_____ - _____	\$ _____
Session III: July 9- July 25	_____	_____ - _____	\$ _____

*(No class May 28<sup>th</sup>, July 4<sup>th</sup>, and July 26<sup>th</sup>)*

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.

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Completed by staff only:

Registered By: \_\_\_\_\_

Date Registered: \_\_\_\_\_

**PLEASE SIGN THE PHOTOGRAPHIC RELEASE ON THE BACK OF THIS FORM**



## Photographic Release Form

Updated 13 October 2008

If you are a minor, your parent or guardian must sign this form.\*

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

Your Name *(please print)*: \_\_\_\_\_

I hereby give the Board of Regents of New Mexico State University irrevocable right and permission to use and publish any and all photographs taken of me by NMSU staff members this date. I recognize these same photographs and their copyright as the property of the Board of Regents of New Mexico State University solely and completely and that they may be used in university publications and promotional materials, including but not limited to the university's catalog and viewbook, recruitment materials, Internet applications, advertising in newspapers and other media, slide shows, displays and exhibits, and other generally recognized communication methods for the purpose of representing university activities and services to potential students and the community at large. I hereby release the Board of Regents of New Mexico State University from any and all claims, including libel and invasion of privacy, resulting from the usage of these photographs. I understand that no modeling fee or other compensation will be paid to me for such use of my photographic license.

Your Signature:\* \_\_\_\_\_

\*Signature of  
Parent or  
Guardian  
(if minor): \_\_\_\_\_

**PLEASE SIGN THE PHOTOGRAPHIC RELEASE ON THE BACK OF THIS FORM**