

Kimball City Pool

Consent to Participate & Medical Information, Lessons & Season Passes

Season Pass Family _____ (\$100) Individual _____ (\$40)

Lessons Public _____ (\$20) Private _____ (\$100)

*Note: Public lessons are free for Kimball address students, sponsored by Kimball Food Pantry.

Parents/Guardians: _____

Address: _____

Main Cell # _____ Additional Cell #: _____

Other Emergency Contacts _____

Child	Age	Grade Completed	Child	Age	Grade Completed
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Medical Information/Consent

Are there any medical problems for any individual listed above that the pool staff should be aware of?

**Children 7 years and younger must be accompanied by someone at least 14 years or older unless they can pass a swim test administered by a lifeguard.

**Life vests will NOT be provided by the Kimball Pool. Lifeguards will NOT be permitted to help any child/ren put on a life vest.

**The Kimball Pool has a ZERO TOLERANCE policy for fake drowning. The individual responsible for such an act shall be barred from the pool for the remainder of the season and no refund will be given for the pass cost.

I/We have been advised through this form that, while not required, it is recommended that the participant have a medical examination prior to participation to ensure that they have no physical condition which might make it dangerous or harmful to the child to take part in such pool activities. Further, permission is specifically given to allow the participation in the same.

I/We fully understand and acknowledge the possible risk involved and do hereby assume the responsibility for such risks, known and unknown, and release the City of Kimball, employees and volunteers from any and all liability whatsoever for any injury or physical condition which may be caused by or resulted from participation in any pool or pool related activities.

I/We have read the attached Kimball Pool Rules and agree to abide by them.

I/We have read and fully understand the foregoing.

Signature of Parent/Guardian: _____

Print Name: _____ Date _____