



Initial: _____
Date of purchase: _____
Receipt #: _____
Membership #: _____

Butte House Road & Acacia Avenue  
Sutter, California

<p align="center"><b>Sessions</b></p> <p>1. _____ June 5<sup>th</sup>- 8<sup>th</sup> &amp; June 12<sup>th</sup>-15<sup>th</sup> (All ages)</p> <p>2. _____ June 12<sup>th</sup>-15<sup>th</sup> &amp; June 19<sup>th</sup>-22<sup>nd</sup> (Ages 0-2)</p> <p>3. _____ June 19<sup>th</sup>-22<sup>nd</sup> &amp; June 26<sup>th</sup> -29<sup>th</sup> (Ages 3-6)</p> <p>4. _____ July 3<sup>rd</sup>-6<sup>th</sup> &amp; July 10<sup>th</sup>-13<sup>th</sup> (All Ages)</p> <p>5. _____ July 10<sup>th</sup>-13<sup>th</sup> &amp; July 17<sup>th</sup>-20<sup>th</sup> (Ages 0-2)</p> <p>6. _____ July 17<sup>th</sup>-20<sup>th</sup> &amp; July 24<sup>th</sup>-27<sup>th</sup> (Ages 3-6)</p> <p align="center"><b>Time</b></p> <p>_____ AM _____ PM</p>	<p><b>Membership</b></p> <p>_____ \$63.00/child</p> <p><b>Non-Membership</b></p> <p>_____ \$70.00/child</p> <p>*Payment on first day to instructor (Check or cash only)</p>
--	---

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

Participant Name (s):

1. _____
2. _____
3. _____
4. _____
5. _____

Ages:

_____
_____
_____
_____
_____

Email: _____	Cell Phone Number: _____
Address: _____	Phone Number: _____
Emergency Contact: _____	Phone Number: _____

RELEASE AND WAIVER OF LIABILITY (This is a legal and binding contract.)

“I am aware that accidents can happen around and in a swimming pool, and I or (my child/children/dependents) am voluntarily participating in the activities with knowledge of the dangers involved and hereby accept any and all risks of injury. I have carefully read this release and waiver and fully understand its content. I also understand that if I or (my child/children/dependents) do not follow the rules of the Morehead Family Community Pool and do not act in accordance with the instructions of the managers or lifeguards that I and/or my child(ren) may be asked to leave the premises. I fully understand that the managers have the duty to close the pool early in the event of extreme weather, water quality problems and/or low attendance (less than 12 swimmers) as agents of the SYO board. I am aware that this is a release of liability, including asserted negligence and is a contract between our family (including our guests) and the Sutter Youth Organization and its board members. I am signing this of my own free will. I agree that in the case of an emergency, illness and/or injury that the supervisor on duty has my permission to authorize emergency treatment for my minor age children.

I hereby give my consent to Morehead Family Community pool to photograph, film, videotape and then use, reproduce and publish said images of me and/or my children.”

---

Signature of Member

---

Date