



## Puget Sound Swim Club (PSSC) Parent Acknowledgement & Signature Form

Swimmer Name: \_\_\_\_\_

Document Name*	Parent Acknowledgement (initial each line item)	Athlete Acknowledgement (initials required for Code of Conduct - Athlete only)
<a href="#">Anti-Bullying Policy</a>		N/A
<a href="#">Code of Conduct – Athlete</a>	N/A	
<a href="#">Code of Conduct – Parent</a>		N/A
<a href="#">Concussion Information Sheet</a>		N/A
<a href="#">COVID-19 Liability Release Form</a>		N/A
<a href="#">Discipline Policy</a>		N/A
<a href="#">Electronic Communication Policy</a>		N/A
<a href="#">Financial Information</a>		N/A
<a href="#">Minor Athlete Abuse Prevention (MAAP) Policy 2.0</a>		N/A
<a href="#">Photography Policy</a>		N/A
<a href="#">PSSC Handbook</a>		N/A

### Athlete Information

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Date of Birth (MM/DD/YY) \_\_\_\_\_

Document Known Allergies \_\_\_\_\_

Current Medications \_\_\_\_\_

### Parent / Guardian Information

Parent/Guardian #1

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

Parent/Guardian #2

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Phone # \_\_\_\_\_

Email Address \_\_\_\_\_



### Emergency Contact Information

Please provide at least 2 contact names, relationship and phone numbers in case of an emergency and a parent/guardian cannot be reached.

#### Emergency Contact #1

Name \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_

#### Emergency Contact #2

Name \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_

### Athlete Signature: Code of Conduct – Athlete

I understand that if I violate PSSC's code of conduct, I will be subject to disciplinary action determined by my coaches and the swim club's board of directors.

**Athlete #1 Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Parent/Guardian Agreement

I hereby acknowledge and accept the obligations and requirements of membership as stated by PSSC in the above policies and documents.

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

**INSTRUCTIONS TO SUBMIT:** please review all of the documents listed above, initial each line item, sign and return to PSSC (bring to practice or email to [secretaryswimpssc@gmail.com](mailto:secretaryswimpssc@gmail.com)). You are also responsible for registering your athlete via USA Swimming using this [link](#). There are 2 membership options available – Flex (for 12U only; 2 meets per year; meet fees are an additional expense) or Premium (unlimited # of meets; meet fees are an additional expense). **Note:** all documents are posted to the TeamSnap app under "More", "Files".