



Sea Sports Swim Waiver and Release Form



Participant's Name: _____ Parent/Guardian Name (if minor) _____

E-mail Address: _____

PLEASE READ CAREFULLY
E-mail Correspondence: I give SEA SPORTS SWIM Permission to correspond with me through the e-mail address I have provided to them. I understand cautionary steps will be taken and my e-mail address will not be used for any other purpose.

Please check one and sign below:
 _____ I AGREE (please sign below)
 _____ I DISAGREE (please sign below)

X _____
 Participant/Parent/Guardian

Date: ____/____/____

PLEASE READ CAREFULLY
Photo Release: I give SEA SPORTS SWIM permission to publish in print, electronic, or video format the likeness or image of my child. I release all claims against SEA SPORTS SWIM with respect to copyright ownership and publication including any claim for compensation related to use of the materials. I understand cautionary steps will be taken to provide minimum identifying information and no specific mailing address or phone number will be used.

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