



**FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

YMCA name: \_\_\_\_\_  
Lesson location: \_\_\_\_\_  
Day/time: \_\_\_\_\_  
Session start/end dates: \_\_\_\_\_  
Student ID: \_\_\_\_\_

# SAFETY AROUND WATER ENROLLMENT AND CONSENT FORM

My child is registering for:

M/W 2:30-3:15

Fridays 5:00-5:30pm

<b>Child's first name:</b>		<b>Child's last name:</b>	
<b>Child's gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-Binary <input type="checkbox"/> prefer not to identify <input type="checkbox"/> Other Identity:		<b>Child's birth date (mm/dd/yyyy):</b>	
<b>Name of parent/caregiver:</b>			
<b>Zip code:</b>	<b>Phone:</b>	<b>Email:</b>	
<b>Emergency contact:</b>		<b>Emergency phone:</b>	
<b>Number of adults and children in your household (including this child):</b>			
<b>Can your child jump into the water and safely exit the pool without help?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Has your child ever had a swim lesson before?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Is your child new to the Y (i.e., has never participated in a Y program before)?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Child's race/ethnicity (optional):</b>			
<input type="checkbox"/> Asian	<input type="checkbox"/> Black or African American	<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> Middle Eastern or North African
<input type="checkbox"/> Native American, Indigenous American or Alaskan Native	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	<input type="checkbox"/> White	<input type="checkbox"/> Two or more races/ethnicities
	<input type="checkbox"/> Other Identity, please specify	<input type="checkbox"/> Prefer not to identify	
<b>How did you hear about this program?</b>			
<input type="checkbox"/> Y staff member/volunteer	<input type="checkbox"/> Friend/family member/word of mouth	<input type="checkbox"/> Mailing/email communication	<input type="checkbox"/> Poster/flyer/Y event
<input type="checkbox"/> Y's website	<input type="checkbox"/> Media (TV, Web, radio, print, etc.)	<input type="checkbox"/> School	<input type="checkbox"/> Community-based organization
	<input type="checkbox"/> Other, please specify:		
<input type="checkbox"/> I have signed and returned the required photo, audio/video, narrative release form.			
<input type="checkbox"/> I have signed and returned the Y's standard liability waiver.			

**Please complete back side of enrollment and consent form**



# SAFETY AROUND WATER ENROLLMENT AND CONSENT FORM

## CONSENT TO PARTICIPATE IN DATA COLLECTION

Your local YMCA and YMCA of the USA collect data and evaluate our programs to see what we are doing well, to identify areas of the program that we can improve, and to make sure that the participants we serve are benefitting from this program. Participant demographics and attendance will be collected as part of participation in this program and will be shared with our program funders.

## WHAT YOU WILL BE ASKED TO DO

For evaluation purposes, we ask your permission to use your child's swim skills assessment results, which is completed by the YMCA swim instructor at the beginning and end of the swim lesson session for program evaluation purposes.

## KEEPING YOUR INFORMATION CONFIDENTIAL

All collected data for this project will be accessible only to the approved and trained researchers and authorized staff. Y-USA plans on keeping this data indefinitely, in order to identify trends in program participation, fidelity, quality, and outcomes over time.

We will not use your child's name in any report or publication; rather, your or your child's data will be aggregated with other program participants. This data may be included in local, regional and national reports; other publications; and submitted to funder or potential funders.

There is a very small risk that confidential data will be compromised. We will minimize this risk by ensuring that only approved local Y and Y-USA staff involved in the program have access to this information.

**WAIVER, RELEASE AND HOLD HARMLESS AGREEMENT:** In consideration for use of the YMCA facilities and participation in or viewing of YMCA programs, I understand that the Bath Area Family YMCA assumes no responsibility for injuries or illnesses which I (or my dependents) may sustain as a result of my physical condition or resulting from participations in any athletic activities, sports program, the use of any equipment exercises or other activities. I expressly acknowledge on behalf of myself and my heirs that I assume the risk for any and all injuries and illnesses which may result from participation in these activities. I hereby release and discharge the Bath Area Family YMCA, its agents, assigns and/or employees from any and all claims for injury, illness, death, loss or damage that result from my participation in these activities. I understand that the Bath Area Family YMCA is not responsible for personal property lost or stolen while members and/or program participants are using Y facilities or on Y premises.

## PHOTO/VIDEO RELEASE

I agree to allow the YMCA to use my child's photographs or video while in the Safety Around Water Program in Data reporting and promotional materials

## AGREEMENT TO SUBMIT DATA

I have read and understand this consent information

Printed name of Individuals or Parent(s)/Caregiver(s): \_\_\_\_\_

\_\_\_\_\_  
Parent/caregiver signature

\_\_\_\_\_  
Printed Name of Child

\_\_\_\_\_  
Date