

H₂O BABY!

MOMMY & BABY WATER FITNESS CLASS

A class designed for a mother and their baby to exercise together in the pool!

Benefits For Both Mother and Baby Include:

Bonding Time
Socializing Skills
Strengthen Muscles
Great for Cardiovascular System
Helps Baby Build Water Confidence

Registration Fee— \$30 (16 Classes)

Offered To: Mothers & (Babies—ages 6 months—2 years of age)
Oh No! Is mom working or taking a much needed nap? Dad do you have your hands full? Don't worry! Fathers are more than welcome to participate in class with your little one!

Class / Times: June 5th—July 26th, 2017
Mon & Wed 4:30PM-5:00PM
Feel free to show up early to use the dressing rooms to get the little ones ready!

Location: Thibodaux Municipal Pool

Instructor: April Danos

*****Register at the Peltier Park Rec Building - Mon-Fri 8:00AM-Noon and from 1:00PM– 4:00PM**

*****Mail-in registration form and check made out to “City of Thibodaux” -**

P.O. Box 5418, Thibodaux LA 70302

*****Online Registration available at www.ci.thibodaux.la.us**

*****For more information contact the Recreation Department at 446-7235**



**Supervised by:
American Red Cross
Certified Lifeguards**

**CITY OF THIBODAUX PARKS & RECREATION
H2O-H BABY - MOMMY AND BABY WATER FITNESS REGISTRATION**

ADULT PARTICIPANT INFORMATION:

NAME:		
DOB:	AGE:	
ADDRESS:		
CITY:	STATE:	ZIP:
EMAIL:		
HOME #:	CELL #:	
LIST ANY MEDICAL PROBLEMS:		
DOCTOR TO NOTIFY	PHONE:	
PERSON TO NOTIFY IN AN EMERGENCY	PHONE:	

CHILD PARTICIPANT INFORMATION:

NAME:	
DOB:	AGE:
LIST ANY MEDICAL PROBLEMS:	
DOCTOR TO NOTIFY:	PHONE:

INFORMED CONSENT AND WAIVER/RELEASE:

I, the undersigned, as the adult participant and the parent of the child participant listed on this application, hereby assume full responsibility for all risks of injury or loss which may result from participation in this swimming program and hereby agree to hold harmless, release and forever discharge the City of Thibodaux Municipal Pool, it's officers, instructors, and employees from and waive any and all claims and demands whatsoever which the undersigned and any of them or any third person of any accident, illness, injury, or death of any person and persons, or damage to or loss or destructions of any property arising or resulting from participation in this swimming program and any time subsequent therto, save and except that the above provisions shall not be applicable to injury or death of persons, or damage to or loss of property arising out of the sole negligent acts or omissions of the City of Thibodaux Municipal Pool, it's officers, instructors, and employees. I understand, agree, and acknowledge that there are risks inherent in the swimming program including, but not limited to paralyzing injuries, brain injuries, and death. With the full understanding of the facts, that to the best of my knowledge, myself and my child listed on this registration has no medical, physical, mental, or emotional health condition which would hinder or prevent participation.

I have read and understood, and I agree with the informed consent and waiver/release outlined above as it relates to myself and my child.

PARENT - PARTICIPANT NAME PRINTED:

PARENT - PARTICIPANT SIGNATURE:

DATE: