

**Donaldson Run Swim Team
Release/Permission to Treat
2008 Swim Season**

We/I hereby give permission for the following swimmer(s) to participate on the Donaldson Run Swim Team:

(insert names of all swimmers)

We/I hereby release Donaldson Run Recreation Association and its employees, officers or agents, including without limitation the Donaldson Run Swim Team coaches and Team Representatives, from any and all claims or other liability arising from the above swimmer(s) participation on the Donaldson Run Swim Team, including at Donaldson Run or other locations.

We/I hereby give permission for any and all medical attention necessary to be administered to the above swimmer(s) in the event of an accident, injury, sickness, etc. occurring while under supervision of the Donaldson Run Swim Team. This authorization is effective during 2008. We/I also hereby assume the responsibility for payment for any such treatment.

In case we/I cannot be reached, the following people are designated to execute any required consent for medical treatment on my/our behalf:

Sarah Myers, Head Coach	Ellen Boryan, Assistant Coach
Enser Cole, Assistant Coach	Erin McCracken, Assistant Coach
Molly Schmalzbach, Assistant Coach	Anne Brown, Team Representative
Ned Woodward, Team Representative	Mike Clark, Pool Manager

KNOWN ALLERGIES OR SPECIAL PRECAUTIONS TO BE TAKEN ON BEHALF OF CHILDREN:

Parent Signature _____ Date _____

Name (please print) _____

Parent Signature _____ Date _____

Name (please print) _____

Physician Name _____ Phone _____

Insurance Company _____ Policy No. _____