



Dolphin Swimming

海豚游泳培訓中心

Tel: 718-359-7743

Registration Form 報名表(A)

(For all sign-up except Brooklyn locations 只供發拉盛, 曼克頓及長島專用)

Student Information 學生資料:

Student's First Name 名字:	Student's Last Name 姓氏:	Sex 性別: M 男 / F 女	Date of Birth (MM/DD/YY) 出生日期(月/日/年) / /
Home Address 住址:	City 城市:	State 州:	Zip 郵區: Current Student 在讀 Yes / No**
Home Phone 家裏電話:	E-mail 電郵:	Text Message 短訊號碼 #	** If no, when was your last term ? ** 如舊生, 前學期是在: _____

Guardian Information 監護人資料:

Father's Name 父親名字:	Mobile Phone 流動電話:	Work Phone 工作電話:	Current Employer 公司名稱:
Mother's Name 母親名字:	Mobile Phone 流動電話:	Work Phone 工作電話:	Current Employer 公司名稱:

Selected Sport(s) 所選運動項目:

Swimming 游泳 Basketball 籃球 Karate 空手道

Class Location 所選上課地點:

Selected Schedule 所選課程:

Queens 皇后區: Flushing Boys' Club 發拉盛男童俱樂部 <input type="checkbox"/>	Long Island 長島: SUNY College at Old Westbury 紐約州立大學 <input type="checkbox"/>	Manhattan 曼克頓: B.C.N.Y. Harriman Clubhouse 曼克頓男童俱樂部 <input type="checkbox"/>	Class Level 級別: _____ Day 日子: _____ Time 時間: _____ Basketball Uniform 藍球制服: Size 尺碼 _____ Paid <input type="checkbox"/>
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Additional Student 其他學生資料:

Full Name (Second Student#2) 學生姓名 (第二位學生)	Date of Birth 出生日期: / / (Male 男 / Female 女)	Sport & Level 所選運動級別:	Day & Time 上課時間:	Current Student 本季在讀學生 Yes/ No
Full Name (Third Student#3) 學生姓名 (第三位學生)	Date of Birth 出生日期: / / (Male 男 / Female 女)	Sport & Level 所選運動級別:	Day & Time 上課時間:	Current Student 本季在讀學生 Yes/ No

Student Medical History 學生病歷 & Guardian Consent 家長授權:

In case of emergency during lesson, the program could contact the appropriate officials when the guardians can't be reached by provided numbers. 遇有緊急事故時, 如無法聯絡家長或監護人, 同意授權海豚通知法定單位(如醫院)處理。

Emergency Contact Person 緊急聯絡人名字: _____ Relationship 關係: _____

Emergency Contact Number 緊急聯絡電話: _____

Student Health History: Asthma _____ Heart Disease _____ Skin Disease _____ Specify Other Illness _____

學生曾患的症狀(請選X): 氣喘 _____ 心臟病 _____ 皮膚病 _____ 其它疾病 _____ (請務必通知、確保學生安全)

I understand that I am signing a contract with Dolphin Swimming to provide a specific service that I request, this contract is binding and I have read and accepted all the terms and conditions written in "Student Rules and Program Policies" upon registration. 我已閱讀並接受海豚游泳培訓中心的“家長及學生需知”所有內容。我明白並同意海豚游泳培訓中心的服務合約條款, 在報名時正式生效。

Printed Name 姓名: _____ Signature 簽名: _____ Date 日期: _____

***** Please Attach Your Full-Payment Check to 支票抬頭請填寫: Dolphin Swimming *****

Health Report & Student Waiver 健康檢查報告及學生同意書! Required for new student 新學生必須繳交



Below For Internal Use Only / 以下只供內部填寫



Tuition Amount 學費: _____ Cash 現金 Check 支票 # _____

Date 日期: _____ Received By 接收人: _____

Dolphin Swimming
P.O.BOX 656900, Fresh Meadows, NY 11365

WAIVER/RELEASE OF LIABILITY

*PLEASE READ CAREFULLY BEFORE SIGNING.
THIS IS A RELEASE OF LIABILITY AND WAIVER OF CERTAIN LEGAL RIGHTS.*

I, _____, the enrolled participant and/or the parent/guardian of the participant(s) (1) _____, (2) _____, (3) _____, agree and understand that swimming is a hazardous activity. I recognize that there are risks inherent in the sport of swimming, including but not limited to, paralyzing injuries and death.

For and in consideration of entrance onto the premises, I agree to release **Dolphin Swimming & Fitness** and its owners, officers, operators, agents and employees from, and waive, any and all claims and liability arising out of the services they provide and/or use of their facility, including but not limited to personal injuries or damages arising from their ordinary negligence. This release and waiver applies to myself and any minor child I bring onto the premises

I authorize any representative of **Dolphin Swimming & Fitness** to have the participant treated in any medical emergency during their participation in any sports program. Further, the participant and/or parent/guardian agree to pay all costs associated with medical care and transportation for the participant.

I have noted on the back of this form any medical/health problems of which the staff should be aware.

I HAVE CAREFULLY READ THE ABOVE LIABILITY RELEASE AND SIGN IT WITH FULL KNOWLEDGE OF ITS CONTENTS AND SIGNIFICANCE.

Signed: _____
(Participant or Parent/Guardian)

Date: _____

Signed: _____
(Participant or Parent/Guardian)

Date: _____