



## Dayton Raider Emergency Information & Medical Release

Swimmer's Name: \_\_\_\_\_

Emergency Contact:

	Mother	Father	Additional*
Names			
Home Phone			
Work Phone			
Cell Phone			
Other Numbers			

Allergies: \_\_\_\_\_

Current Medications: \_\_\_\_\_

Current Medical Concerns: \_\_\_\_\_

Insurance Information

Subscriber's Name (parent): \_\_\_\_\_

Insurance Company: \_\_\_\_\_

ID# \_\_\_\_\_

Group# \_\_\_\_\_

Insurance authorization phone number: \_\_\_\_\_

Preferred local hospital: \_\_\_\_\_

I certify that, to the best of my knowledge and belief, that \_\_\_\_\_ is in good physical condition and has no condition which would impair participation in the swimming program. In case of injury, of whatever kind or nature and however caused, in the event I am unable to be reached, I hereby give the Dayton Raider swim club and its coaching staff permission to act on my behalf in seeking medical treatment from any licensed physician, hospital or clinic for my child in the event that such treatment is deemed necessary while my child is participating in Dayton Raider swim club activities. I give permission to those administering medical treatment to do so using methods deemed necessary. I hereby release and absolve the Dayton Raider swim club and its coaching staff from all liability while acting on my behalf in this regard.

I hereby unconditionally release the Dayton Raider swim club, its employees, officers, directors, and volunteers and any facility used by the Dayton Raider swim club from any liability arising out of any injury to \_\_\_\_\_ which may occur while \_\_\_\_\_ is participating in the Dayton Raider swim program, including, but not limited to, practices, meets, travel and other team activities, or while \_\_\_\_\_ is using facilities leased or used by the Dayton Raider swim club.

\_\_\_\_\_  
Parent/Guardian Signature OR Participant Signature (if over the age of 18)

Date \_\_\_\_\_

\* An additional emergency contact is recommended in case either parent/guardian cannot be reached