

Asgard Swimming Club

SWIMMERS

I have read, understood and agree to abide by the code of conduct for swimmers and the anti-bullying pledge.

Signature of Swimmer(1)_____ Date_____

Please print name_____

Signature of Swimmer(2)_____ Date_____

Please print name_____

Signature of Swimmer(3)_____ Date_____

Please print name_____

PARENTS/GUARDIANS

I have read, understood and agree to abide by the Code of Conduct for Parents/Guardians.

Parent's Signature_____ Date_____

Parent name please print_____