

AGREEMENT AND RELEASE FROM LIABILITY

Voluntary Participation – I, _____ parent/legal guardian, of _____ (minor participant) acknowledge that I have voluntarily applied to the **Water Polo Camp** for _____ (minor participant) to participate in an instructional **water polo camp** at the premises of **Arroyo Grande High School Pool** (location of camp).

Assumption of Risk – I AM AWARE THAT **WATER POLO** IS A HAZARDOUS ACTIVITY. I, _____parent/legal guardian acknowledge that _____ (minor participant), WITH MY CONSENT AND PERMISSION, IS VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND HEREBY AGREE TO ACCEPT ANY AND ALL RISKS OF INJURY OR DEATH.

Release – As consideration for _____ (minor participant) being permitted by the **AG Water Polo Camp** to participate in these activities and use of related facilities, I hereby agree that I, my assigns, heirs, distributes, guardians, and legal representatives will not make a claim against, sue or attach the property of the **AG Water Polo Camp** on account of injury or damage resulting from the negligence or other acts, howsoever caused, by any employee, agent, representative, or contractor of the **AG Water Polo Camp** as a result of _____ (minor participant) participation in the water polo camp. I hereby release the **AG Water Polo Camp** from all actions, claims or demands that I, my assigns, heirs, distributes, guardians, and legal representatives now have or may hereafter have for injury or damage resulting from the participation of _____ (minor participant) participation in the water polo camp.

Medical Authorization – I hereby authorize the employees, agents, and representatives or contractors of the **AG Water Polo Camp** to exercise its best judgment for any emergency medical treatment required by _____ (minor participant) as a result of his/her participation in the **AG Water Polo Camp**.

Knowing and Voluntary Execution – I HAVE CAREFULLY READ THIS RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE **AG WATER POLO CAMP** ON BEHALF OF _____ (minor participant) AND SIGN IT OF MY OWN FREE WILL.

Dated: _____ Parent/Guardian: _____

Emergency Contact: _____

Phone Number: _____



429 Bakeman Ln.
Arroyo Grande, Ca 93420
www.eagleaquatics.com

Arroyo Grande Summer Water Polo Camp

**Arroyo Grande
Summer Water
Polo Camp**



*Lucia Mar
Summer Water
Polo Camp.*

*Youth & High School
www.eagleaquatics.com*

Coach Allen:

Tel: 805-704-9907
Email: agpolocoach@hotmail.com

Arroyo Grande Water Polo

www.eagleaquatics.com

Arroyo Grande Summer Water Polo is designed to give an athlete the necessary skills to play water polo. The basic fundamentals will be taught at all levels, for they are the building blocks for a successful water polo player. The



Jesse shooting the ball.

camp is geared to teach an advanced player the team oriented skills needed to play at the high school level. The youth camp will teach the athletes how

to play the game and introduce the basic rules. **No experience is necessary.**

Through the summer athletes will get the necessary skill to be successful at all levels from varsity to youth polo.

Junior Lifeguards: If your athlete is in Pismo Junior Guards they can leave at 8:45 on their late days to get to Pismo on time.

Date and Time High School & Incoming Freshman

May 18— June 11

Girls = T & TH 3:00 pm-5:30 pm

Boys = M & W 3:00 pm-5:30 pm

June 15—July 31

Girls = T & Th. 6:00 am—6:45 am Weights

6:45 am-8:00am Water Polo

M&W 8:00 am—10:00 am Water Polo

Boys= W&F 6:00 am—6:45 am Weights

6:45 am– 8:00 am Water Polo

T & Th. 8:00 am—10:00 am Water Polo

Tournament/ League INFO:
www.eagleaquatics.com

Youth Polo June 15—July 30

Incoming 3rd— 8th Grade

M&T&TH 3:30 pm—5:00 pm

Tournaments will be posted @www.eagleaquatics.com



Tommy Martin in the cage

Arroyo Grande Summer Water Polo

Sign up for:	Price
<input type="checkbox"/> High School Summer Water Polo	&225.00
<input type="checkbox"/> Youth Summer Water Polo	\$125.00

Subtotal: _____

Total: _____

Name _____

Address _____

Phone: _____ Athlete Cell: _____

Email Address _____

USWP# : _____ B-DAY : _____

Method of Payment

- Check
 Online www.eagleaquatics.com

Make Check Payable :
AGHS Water Polo.



USWP:

All athletes are required to register for USWP as our secondary insurance provider.
Register @ www.usawaterpolo.com

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www.eagleaquatics.com

Phone: 805-704-9907
Email: agpolocoach@hotmail.com