



C. community      R. resource      E. enrichment      W. wellness

**“B**oot **C**amp” / “**G**ym n **S**wim”

*First class is to meet at the High School Front Parking Lot. Classes will meet outdoors for group social distancing workouts. If weather is unfavorable, Facebook Live will take place. Please note all Covid-19 guidelines posted on CREW/Pool website.*

***September/October 2020***  
***Begins at 5:15 am Monday, Wednesday & Friday***

Cost: \$8 just drop in  
 \$45 for Pool Members & Senior Citizens (2 month session)  
 \$55 for non-Pool Members (2 month session)

**Safe COVID-19 practices and guidelines must be followed. Guidelines are posted on the CREW/Pool web and posted at our facility.**

**BOOT CAMP**

***\*\*\*SIGN UP FORM and WAIVER AND RELEASE FROM LIABILITY\*\*\****

By this Waiver, I assume any risk, and take full responsibility and waive any claims of personal injury, death or damage to personal property associated with **Lodi School District Recreation and Education Program** activities and events organized by **The School District of Lodi.**

I understand and confirm that by signing this WAIVER AND RELEASE I have given up considerable future legal rights. I have signed this Agreement freely, voluntarily, under no duress. My signature is proof of my intention to execute a complete and unconditional WAIVER AND RELEASE of all liability to the full extent of the law. I also grant permission for CREW to post photos on social media and the website. I am 18 year of age or older and mentally competent to enter into this waiver.

Participant Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

*\*Participant Signature:* \_\_\_\_\_ *\*Date:* \_\_\_\_\_

*f Participant is under 18 years of age:*

Parent/Guardian Name: \_\_\_\_\_

*\*Parent Signature:* \_\_\_\_\_ *\*Date:* \_\_\_\_\_