Guest List for _____ Party

I understand the risk involved in participating in swimming. I release AQua Wave Swim School from any liability occurring while the participants listed below are involved in our "Birthday Party Swim."

This list must be submitted to AQua Wave (4) four days prior to the party

Name: Phone #: Age:

1._____

2._____

3._____

4._____

5._____

6._____

7._____

8._____

9._____

10._____

11._____

12._____

13._____

14._____

15._____

16._____

17._____

18._____