Assumption of Risk; Release of Liability; Indemnity; Authorization: All physical activity carries with it inherent risks to individuals of all ages. The fitness equipment and the facility of the Club present hazards which, if not avoided, can cause serious injury or death.

As consideration for my being permitted to use the Club or its programs, I ACKNOWLEDGE THAT THE CLUB GROUP CANNOT AND DOES NOT GUARANTEE THAT THE EQUIPMENT, PROGRAMS, SUPPLIES, SERVICES AND FACILITIES ARE GERM/VIRUS FREE AND I EXPRESSLY AND VOLUNTARILY AGREE TO ASSUME ALL RISK OF SERIOUS INJURY OR DEATH and HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE THE CLUB GROUP with respect to any and all liability (including liability arising from the negligence of the Club Group) for claims, causes of action, injuries including death, damages, demands, costs, loss of services, expenses, theft, attorney's fees, and other claims, known or unknown, of whatever nature arising out of the premises or programs of the Club Group (collectively, "Claims"). Furthermore, I agree to indemnify, defend, and hold harmless the Club Group from and against: (i) any such Claims by the undersigned or by others; and (ii) any related fines, fees, or expenses, including attorney fees. I agree that this Release applies to me, any family member or guest ("We") and to each and every use We make of the Club.

I expressly agree that the release, assumption of risk, and indemnity herein is intended to be as broad and inclusive as is permitted by the law of the State of Ohio and that if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I hereby authorize the Club to contact me by telephone, email, or otherwise regarding the Club, including soliciting me for membership.

Responsibility for medical conditions; signs and labels; notifying staff. I understand that I am responsible for monitoring my condition at all times. If during use of the Club unusual medical symptoms occur, I will cease my participation and seek prompt medical attention. Prior to using the equipment or facility I will read all warning labels, instructions, signs and placards in the facility. If I am unsure how to use the equipment or facility, I will seek the assistance of staff. I will immediately report any piece of equipment or area of the facility that is not functioning properly to staff. I will not attempt to use or fix any piece of equipment or area of the facility that is not working properly.

Ohio law and Waiver of Jury Trial: This agreement and any claim, controversy or dispute arising out of it, or arising out of use of the Club, shall be governed by and construed in accordance with the laws of the State of Ohio. The undersigned hereby knowingly, voluntarily, and unconditionally waives the right to a jury trial of any claim, controversy or dispute arising out of this agreement, or arising out of the premises or programs of the Club Group.

Release, assumption of risk, and agreement as to minors: With respect to participation by a minor, I, the undersigned parent, guardian, or custodian of the minor, for myself and on behalf of the minor, hereby: (a) voluntarily assume all of the risks of physical activity and risks of use of the premises as described above; (b) RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE THE CLUB GROUP with respect to any and all liability, per the terms stated above; and (c) agree that all other terms of this agreement apply to the minor.

Members Name:_____ **Member Signature:**_____

Cancellations and Refunds

Cancellations must be made at least one week prior to the start of the session in order to receive any refund. An administration fee of $25 per session will be deducted from all refunded amounts. No refunds will be given for days missed. All cancellations must be made in writing with a full signature and date. Anyone canceling less than a week in advance will receive no refund and will be charged the full amount.

Cincinnati Sports Club
With TriHealth | BEACON

ADULT AQUATICS PROGRAM

Adult Swim Clinics
Masters Swimming
Private Lessons

Must be an active member to participate

Cincinnati Sports Club
With TriHealth | BEACON

Two convenient entrances:
5535 Murray Avenue or 3950 Red Bank Road
Cincinnati, Ohio 45227

513.527.4000

CincinnatiSportsClub.com

SWIM CLINICS

The Cincinnati Sports Club offers a comprehensive Swim Lesson program for adults. Whether you're a fearful first – time swimmer or are looking to improve your existing skill set, the Cincinnati Sports Club has a program for you.

Adult Swimming 101:

For adults who may be fearful of the water, or are still gaining comfort in the water. Takes place in the Warm Water Pool.
Skills Adult Beginners will Learn:

- Front crawl (Freestyle)
- Backstroke
- Breaststroke
- Rotary Breathing
- Treading water

Offered on an ongoing weekly basis.

$24/week
Monday/Wednesday/Friday
7am-7:45am

Adult Swimming 201:

For adults who are comfortable in the water and are looking to expand their skill set. Takes place in the Warm Water Pool.

- Endurance
- Increasing speed
- Training
- Turns

Offered on an ongoing weekly basis.
$24/week
Monday/Wednesday/Friday
7am-7:45am

Adult Learn to Swim Clinic:

Join us for a weekly swim clinic for adults who are new to swimming and wanting to be more comfortable in the water!

Monday 5:15pm-6m $12 per class

MASTERS SWIMMING

Masters Swim Team:

For adults ages 18+ who are proficient swimmers. Each practice will help build endurance, increase strength, and improve stroke technique. Charged to member account by the month.

October-May
Monday/Wednesday/Friday
6am-7am
Indoor Lap Pool
$45/month

June-September
Monday/Wednesday/Friday
5:30am-7am
Main Outdoor Pool
$67.50/month
**will move indoors in inclement weather*

Private Swim Lessons:

30 minutes of instruction with an instructor. From fearful beginner to accomplished tri-athlete, our coaches can help you meet your swimming goals.

1 Swimmer (Private)
Members: $40

2 Swimmers (Semi-Private)
Members: $60

The Participant **must** be a member to participate.

For questions or more information, contact the youth director at 513-527-1908 or lbresser@cincinnatisportsclub.com

REGISTRATION FORM

PROGRAM	START DATE
Adult Swimming 101	
Adult Swimming 201	
Masters Swim Team	
Adult Learn to Swim	
Private Lesson	

Swim Registration: The Youth Director will follow up within 3 days of receipt of this form to confirm enrollment/schedule lessons.

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

DOB _____ ☐ Member

METHOD OF PAYMENT

☐ **Bill to member account**

Credit Card: ☐ Visa ☐ Mastercard ☐ Discover

Credit Card # _____ Exp. Date _____

Signature _____ Date _____

3-digit code on back card _____

I hereby permit the Cincinnati Sports Club to record my performance on print, digital, or video medium for use in promotion and distribution.

X _____