



2021

## Harris County Adult Aquatics Program Physician's Release Form

The Harris County Adult Aquatics Program offers swimming lessons, lap swimming, water aerobics, and aqua zumba classes. Some of these activities may result in an increased heart rate. These are fitness classes but they are designed for **recreational purposes only**. Please consult with your Physician before participating in class.

**Check the appropriate box:**

\_\_\_\_\_ **Swim Lessons** – Teaches participants the fundamentals of swimming with an overall goal of learning how to swim correctly and water survival skills.

\_\_\_\_\_ **Lap Swimming** – Allows participants to use the pool to swim continuous laps. Participants are required to pass a swimming test.

\_\_\_\_\_ **Water Aerobics** – low impact, high cardio exercises.

\_\_\_\_\_ **Aqua Zumba** – low impact, high cardio exercises.

### Physician's Clearance to Participate Statement

I have reviewed the classes and activities associated with the Harris County Adult Aquatics Program and I hereby clear \_\_\_\_\_ whose address is \_\_\_\_\_ for participation in the program described above.

**Restrictions if any:**

\_\_\_\_\_  
\_\_\_\_\_

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
**Physician's Signature**

\_\_\_\_\_  
**Printed Name and Title**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**Phone** | **Fax**

### Participant's Authorization and Release

I hereby authorize my doctor to execute the above form, which allows my participation in the Harris County Adult Aquatic Program.

\_\_\_\_\_  
**Participant's Signature**

\_\_\_\_\_  
**Date**

***This form is required annually. Class participation is contingent upon submittal of this Physician's Release form.***