ATLANTA DIVING ASSOCIATION
2935 Grange Hill Way
Cumming, GA 30041
(770) 844-7710
www.atlantadiving.com

APPLICATION FOR MEMBERSHIP 2026-2027 SEASON

DIVER'S NAME: _____ DATE OF BIRTH: _____

PARENT'S NAME: _____ GENDER: MALE ☐ or FEMALE ☐

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ GRADE: _____

CELL PHONE #1: _____ CELL PHONE #2: _____

PARENTS E-MAIL ADDRESS: _____ SCHOOL: _____

PREVIOUS TRAINING(new divers only): _____

HOW DID YOU HEAR ABOUT ADA: _____

NUMBER OF PRACTICES PER WEEK (circle one) ☐ ONE ☐ TWO

GROUP: ☐ LESSON OR ☐ HIGH SCHOOL

SITE: CUMMING AQUATIC CENTER

MONTHLY FEE: $_____
CUMMING:

Lesson Group: $150 (1 practice per week) $200 (2 practices per week)
High School Group: $150 (1 practice per week) $200 (2 practices per week)

ANNUAL REGISTRATION FEE (good through August 2027): + $100

TOTAL AMOUNT DUE (payable to Atlanta Diving Assoc.): $_____

I have read and agree to abide by the Atlanta Diving Association policies and procedures. I understand that I will continue to be billed until I notify ADA in writing that my diver will no longer be attending practices. I authorize ADA to register my diver with AAU and/or US Diving. **All divers must give a 15-day written notice before the end of the session in order to allow their spot to be filled or they will be charged for the next month's session**. NO FEES WILL BE PRORATED.

_____ _____
Parent's Signature Date

Atlanta Diving Association, Inc.

General Release and Waiver of Liability

In consideration for being allowed to participate in practices, training sessions, meets, competitions, and/or any activities associated with Atlanta Diving Association, the undersigned:

1. Agree(s) to release, waive, indemnify, hold harmless and release from any and all liability to Atlanta Diving Association, Inc its administrators, directors, officers, shareholders, coaches, and representatives(hereinafter referred to as the releasees) from any and all present or future claims, rights, demands, damages, causes of action and/or liability of every nature and kind whatsoever which the undersigned may have against the releasees of claims caused or alleged to be cause in whole or in part of the actions, inactions or negligent of the releasees.

2. It is understood by the undersigned that participation in the sports programs as well as related events, practices, competitions, and activities including travel to and from related events, competitions, and activities with Atlanta Diving Association, Inc could cause serious injury, including permanent impairment and/or disability, spinal cord injury, head injuries, fractures, sprains, paralysis, emotional and psychological injuries, social and economic losses and death which may result not only from the participant's own actions, inactions or negligence but also the actions, inactions or negligence of others, including the negligence of the releasees, the rules of play or the conditions of the premises or any of the equipment used. The events, practices, competitions, activities and travel include, but are not limited to, warm-up activities, mat drills, somersaulting drills, trampoline exercises, dry-land exercises, springboard and platform diving, automobile travel to and from events, competitions, practices, and/or activities.

3. The undersigned expressly agree(s) to release, waive, indemnify, hold harmless and discharge the releasees from any and all liability to each of the undersigned for any and all claims, demands, costs, attorney's fees, losses or damages on account of injuries or death including, but not limited to those injuries as set forth above whether caused in whole or in part by the negligence of the releasees or others while the undersigned is engaging, participating or present during any event, competition, practice, training session, activity or travel. The undersigned expressly release(s) and waive(s) any claim for injuries, death, damages or loss against the releasees caused in whole or part by the negligence of any releasee or negligence of a combination of releasees or others.

4. In entering into this release, the parties declare that they fully understand the terms of this release and voluntarily enter into this release and voluntarily accept its provisions. Further, the undersigned represent that they have completely read all the terms and conditions hereof and that such terms are fully understood and voluntarily accepted by all parties.

5. The undersigned acknowledge that they are waiving and releasing substantial rights and claims and potential future claims and have voluntarily decided to assume the inherent risks involved.

_____	_____	_____
Athlete Signature	Athlete Printed Name	Date

If the age of the athlete is less than eighteen(18) years of age, then the parent or legal guardian must also sign below.

_____	_____	_____
Parent or Legal Guardian Signature	Parent or Legal Guardian Printed Name	Date