

Staff Use Only
Date Pd. _____
Amount _____
Method _____



Summer Swim League

Registration Form-Please Submit By Friday May 11th

Section A – Contact Information

Participants Name _____ DOB _____
Home Address _____
Home Telephone: _____ Cell: _____
E-Mail Address _____
Parent/Guardian Name _____
Emergency Contact Name: _____ Telephone: _____

Is the above named participant a Sports Center member? ____ Yes ____ No

Section B – Background Information

1. Describe the participant's previous experiences with an organized swim program.

2. What is the participant's current skill level in the water?

3. Does the participant have any type of medical conditions such as asthma, seizures, diabetes, etc. that may affect his/her ability to participate in this program? ____ Yes ____ No
Describe

4. What do you and the participant hope to gain from being involved in the summer swim program?

Section C – Waivers and Releases

Photo Permission

The participant's picture may be taken at programs. If you do not wish to grant photo permission, please state so. Otherwise, we will assume that approval is given. Please initial after reading _____ .

Emergency Treatment Permission

In case of an accident or injury, and in the absence of a parent or guardian, the Sports Center will provide first aid treatment and will have the participant placed under the care of emergency medicine professionals, including the hospital when necessary. Please initial after reading _____ .

Waiver and Release

I understand that my family and I are involved in this program at our own risk and are solely responsible for any injury that we sustain as a result of participation in the program. We agree to hold harmless Sports Center, its staff and owners for any injuries sustained.

Parent Name _____ Date _____

Parent Signature _____



Summer Swim League

T-Shirt Order Form

****Please submit prior to May 11th 2018 to assure proper placement of your order****

Parent(s) Name(s) _____

Swimmer(s) Name(s) _____

Phone #s: home _____ cell _____ work _____

E-Mail Address _____

Shirts are Hanes Beefy-T 100% Cotton

Adult Size	Quantity
Small	
Medium	
Large	
XL	
2x	
3x	
Youth Size	Quantity
X-Small	
Small	
Medium	
Large	
XL	

Total Qty. Ordered _____ @\$10/ea = _____

Total Cost _____

Size Guide

	XS	S	M	L	XL	2X	3X
Women	0-2	4-6	8-10	12-14	16-18	20-22	24-26
Men(chest)	--	34-36	38-40	42-44	46-48	50-52	54-56
Youth	2-4	6-8	10-12	14-16	18-20	--	--

Staff Use Only	
Total Shirts _____	Total Cost _____
Amount Paid _____	Date Paid _____ Payment Method _____