

Scottsdale Swim Club

Swim Clinic Registration 2010

CHECK IF NEW TO SWIM TEAM

Parents' Names		Phone No.		
<input type="checkbox"/> Address		Email		
<u>Swimmer's Name</u>	<u>Boy/Girl</u>	<u>Date of Birth</u>	<u>Age on 6/15/09</u>	<u>Fees</u>
Total Remittance: \$				

- Fees are \$200.00 per swimmer for members and \$250 for non-members.
- Payment Plan Option 50% due by March 15th and remainder due March 30th.
- Make checks payable to: Scottsdale Swim Team.

Swim Team Registration Night
Tuesday, March 9, 2010
6:30 P.M.
SPORTS BASEMENT

FULL RELEASE AND INDEMNIFICATION AGREEMENT:

For and in consideration of my child's participation in the Swim Clinic program and other valuable consideration, the undersigned parents or guardians consent to the above child(ren) participating in the clinics, and release the Scottsdale Swim Team and Tennis Club, its members, officers, employees or Board of Directors from any liability or claim resulting from any accident or injury sustained by the child(ren) during or coming to or going from said events; and we further agree to indemnify and assume all expenses, costs, attorney's fees and losses arising from said injury or accident to said child(ren) and to hold said Scottsdale Swim Team and Tennis Club, its members, officers, employees and Board of Directors free and harmless there from.

1. _____ **Date** _____ **2.** _____ **Date** _____
 (Parent or Guardian) (Parent or Guardian)

IN ORDER FOR YOUR CHILD(REN) TO PARTICIPATE IN THE PROGRAM BOTH PARENTS MUST SIGN FORM

Reg Ck#
Ad Ck#
OK'd By