



2019 REGISTRATION

BIRCHWOOD SWIM & DIVE TEAM

SUNDAY JUNE 2nd, 2019 (One form per family)

Please bring cash or check *(make check payable to "Birchwood Swim and Tennis")
Please write clearly

Parent Name(s): _____

Mailing Address: _____

E-mail: _____ E-mail: _____

Home Phone: _____ Cell Phone: _____

Fee: \$100 per swimmer/diver

Total:

☐ Cash ☐ Check

Child's Name	Date of Birth	Sex	Age As of 7/1/19	Swim Team	Dive Team	T-Shirt size	Returning Team Member
		M/F					Yes/No
		M/F					Yes/No
		M/F					Yes/No
		M/F					Yes/No

Favorite/Best Strokes: _____

Please List any dates that your child will not be available for swim meets: _____

The Swim and Dive Team needs plenty of assistance from parents. We request that a parents from each family volunteer to sign up for one of the following activities. You will be called on throughout the season to help out and your kids will appreciate you being involved! Please check on (or more) of the following boxes:

☐ TIMING

☐ RIBBON WRITING

☐ SCORING

☐ SOCIAL EVENTS

OVER →

RELEASE FORM

I _____, understand that in all/any physical activity an element of risk is involved. I give my child _____, _____, _____, _____, permission to participate in the Birchwood Swim & Dive Team Program. I release Birchwood, their employees and agents, from any and all liability for injury and loss which may occur during my child's participation in the Birchwood Swim & Dive Team Program.

In case of an emergency, I give permission to the Birchwood Staff to take, or have my child transported to a hospital for treatment, including evaluation of injuries, x-rays and needed care.

Signature: _____ Date: _____

Please list any specific health problems, physical limitations, or allergies that may affect or interfere with the athlete's ability to participate in the full program. _____

Please list names/numbers of people other than parents to contact in the event of an emergency:

Name: _____ Phone: (_____) _____ - _____

Name: _____ Phone: (_____) _____ - _____

PERMISSION TO USE PHOTOGRAPH

Birchwood Swim & Dive Team

I grant to Birchwood Swim & Tennis Club, its representatives and employees the right to take photographs of me and my property in connection with the above-identified subject. I authorize Birchwood Swim & Tennis Club, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that Birchwood Swim & Tennis Club may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Signature _____ Date _____

Printed name _____

Address _____

Signature, parent or guardian _____ Date _____