

## **REGISTRATION FORM**

SWIMMER INFORMATION		
FIRST	LAST	
DATE OF BIRTH: (MM) (DD)	(YY) AGE:	
GENDER: MALE FEMALE		
PARENT/GUARDIAN 1 FIRST	LAST	
EMAIL ADDRESS		<del></del>
PHONE (W) MOBILE		
PARENT/GUARDIAN 2 FIRST	LAST	
EMAIL ADDRESS		· · · · · · · · · · · · · · · · · · ·
PHONE (W) MOBILE		
EMERGENCY CONTACT (other than above me	entioned)	
PARENT/GUARDIAN FIRST	LAST	
PHONE (H) MOBILE_	WORK	
WAIVER/RELEASE		
I, the undersigned as parent or guardian agree that I will not hold The Barracuda Swim Club, Qt to the above-mentioned swimmer, his or her heirs, executors, or representative for any and all in person to property arising or in connection with the use of these facilities. The undersigned furth acting on its behalf from any injuries that may results from any pre-existing condition or impairme the above-mentioned swimmer and that includes any future injuries, damages and losses.	jury, damages, accidents, deaths, claims, actions to cause of action whatsoever to er releases The Barracuda Swim Club, Queen's College, Swim coaches, instructo	o the above-mentioned swimmer's irs, members, associates and anyone
I acknowledge and accept that the above-mentioned swimmer is participating in this program an	d all its activities related thereto is voluntary and agree to abide by the rules as pu	blished in The Team Handbook.
SIGNATURE: DATE:		
FOR INTERNAL USE ONLY		
FLYING DRAGONS TIGERS N	EONS DARTS AWAY	

