SVGC STINGRAYS SWIM TEAM SUMMER 2011 REGISTRATION APPLICATION

SOUTHERN VILLAGE ☐ GOVERNORS CLUB ☐ GOVERNORS PARK ☐ GOVERNORS VILLAGE ☐ THE PRESERVE ☐ BRIAR CHAPEL ☐

SWIMMER 1 NAME_____ _____ Adult: XXL, XL, L, M, S Child: L, M, S _____
LAST **FIRST** **T-SHIRT SIZE** **# of YRS on TEAM**

AGE_____ **(LIST AGE AS OF JUNE 1, 2011)** **BIRTHDAY**_____/_____/_____ **SEX**_____

SWIMMER 2 NAME_____ _____ Adult: XXL, XL, L, M, S Child: L, M, S _____
LAST **FIRST** **T-SHIRT SIZE** **# of YRS on TEAM**

AGE_____ **(LIST AGE AS OF JUNE 1, 2011)** **BIRTHDAY**_____/_____/_____ **SEX**_____

SWIMMER 3 NAME_____ _____ Adult: XXL, XL, L, M, S Child: L, M, S _____
LAST **FIRST** **T-SHIRT SIZE** **# of YRS on TEAM**

AGE_____ **(LIST AGE AS OF JUNE 1, 2011)** **BIRTHDAY**_____/_____/_____ **SEX**_____

SWIMMER 4 NAME_____ _____ Adult: XXL, XL, L, M, S Child: L, M, S _____
LAST **FIRST** **T-SHIRT SIZE** **# of YRS on TEAM**

AGE_____ **(LIST AGE AS OF JUNE 1, 2011)** **BIRTHDAY**_____/_____/_____ **SEX**_____

ADDRESS _____ **CITY**_____

ZIP_____ **HOME PHONE** _____ **CELL PHONE(S)**_____

EMERGENCY CONTACT NUMBER(S) if different than already listed _____

PARENT'S EMAIL ADDRESS_(1)_____

PARENT'S EMAIL ADDRESS_(2)_____
PLEASE PROVIDE AT LEAST ONE EMAIL ADDRESS. ALL TEAM COMMUNICATIONS ARE BY EMAIL AND WEB SITE LOCATED AT HTTP://SOUTHERNVILLAGECLUB.COM/SWIM-TEAM/

PARENT/GUARDIAN NAME (Print) _____

REFUND POLICY: Withdrawal from the swim team must be submitted in writing. If withdrawal occurs by May 17, 2011 (1st day of practice), then a 90% refund. If withdraw occurs between May 18 and June 1, 2011 (Mock Meet), then a 50% refund. NO refund after June 1, 2011; no exceptions as our budget has been established. _____ initial

MAKE ALL CHECKS PAYABLE TO "SVGC SWIM TEAM".

NO T-SHIRTS WILL BE ORDERED AFTER MAY 17, 2011 (first practice).

AUTHORIZATION: I hereby give consent for my child(ren) to participate with SVGC SWIM TEAM. In consideration of being permitted to participate as a member of the SVGC SWIM TEAM, I hereby release, discharge and agree to hold harmless the Southern Village Swim & Tennis Club, and coaches, members of the SVGC Board, volunteers, agents and employees, together with it's successors and assigns, from any and all liability for injuries to property or person suffered as a result of participation as a member of the SVGC SWIM TEAM. I agree that it is the swimmers', their parents/guardians', or designated representatives responsibility to provide transportation to, from and during any activity of the SVGC SWIM TEAM and that any transportation provided by representatives of SVGC SWIM TEAM is not being provided on behalf of SVGC SWIM TEAM, and is strictly voluntary on the part of the person providing that transportation. I agree to participate as a Volunteer. Further SWIM TEAM information can be found at http://southernvillageclub.com/swim-team/.

_____/_____ _____
SIGNATURE **RELATIONSHIP TO SWIMMER** **DATE**

FOR TEAM USE ONLY NUMBER OF CHILDREN _____ AMOUNT PAID _____ CASH – CHECK

ADDITIONAL TSHIRT ($10) AMT PAID _____ SIZE _____ SWIM SUIT AMT PAID _____ SIZE _____

1 CHILD = $135 **2 CHILDREN = $270.00** **3 OR MORE CHILDREN = $325.00**