

Registration Fee Paid: \$ \_\_\_\_\_

# Highlands Swim Team Registration 2011 Season

Family Last Name: \_\_\_\_\_  
Parents Names (first and last) \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Work: \_\_\_\_\_ **Email:** \_\_\_\_\_  
**\*Important: All team information will be conveyed via email!**

Emergency contact names and numbers: \_\_\_\_\_  
\_\_\_\_\_

1<sup>st</sup> child name: \_\_\_\_\_ M \_\_\_ F \_\_\_  
Age: \_\_\_ DOB: \_\_\_\_\_ Prior team experience: \_\_\_\_\_

2nd child name: \_\_\_\_\_ M \_\_\_ F \_\_\_  
Age: \_\_\_ DOB: \_\_\_\_\_ Prior team experience: \_\_\_\_\_

3rd child name: \_\_\_\_\_ M \_\_\_ F \_\_\_  
Age: \_\_\_ DOB: \_\_\_\_\_ Prior team experience: \_\_\_\_\_

4th child name: \_\_\_\_\_ M \_\_\_ F \_\_\_  
Age: \_\_\_ DOB: \_\_\_\_\_ Prior team experience: \_\_\_\_\_

**\*CONSENT TO SWIM:** I hereby agree to indemnify and hold harmless The Highlands Swim Team, its Directors, Agents, or Assigns including coaches and meet officials against all injury of said swimmer(s) from any cause that may arise by virtue of said swimmers participation in this swim program. I further signify that we agree to abide by and accept the rules and regulations of the swim team.

Signature: \_\_\_\_\_

**\*MEET ASSIGNMENTS:** I understand that in registering my child for the swim team, it is mandatory that I work at several meets throughout the season. If I do not sign up to work at meets, jobs will be assigned for me. If I cannot perform my assigned job at a meet, it is my responsibility to find a replacement. I understand that a \$50 fee will be assessed if a replacement is not found. I will be notified via email within 24 hours following the meet if a fee is being assessed. If the fee is not paid immediately, I understand that my child (or children) will not be entered in the next meet.

Signature: \_\_\_\_\_

Note: The HST coaches will determine which events the swimmers will compete in. If there is an issue to discuss with the coaches, please complete a conference request form located in the swim team box and place the request form in the coach folder.

**\*\*If you are filling out this form before or after the official registration dates, please place the form along with the registration fee in Misi Benfanti's mailbox at the pool or her home mailbox located at 11400 Shellharbor Court**

**\*\*\*If you decide to resign from the team notify Misi Benfanti at [misi.benfanti@troutmansanders.com](mailto:misi.benfanti@troutmansanders.com) for refund if applicable.**