<u>Villages of Westminster</u> 2016 Swim Team - Swimmer Signup

	Parent / Guardian			Additional Contact		
Last Name						
First Name						
Street Address						
Cell Phone						
Email Address						
Can we use this in	formation for a tear	m directory?	Yes or No			
Swimmer Information:						
Name	Age	DOB	M or F	Swimsuit Size	TShirt Size	
Name	Age	_ DOB	M or F	Swimsuit Size	TShirt Size	
Name	Age	DOB	M or F	Swimsuit Size	TShirt Size	
	t information: (Nar					
We would like to tr	ial the swim prograr	n for a week.	We are s	ubmitting our regis	tration fee now.	
"Villages of Westminster S	arent(s)/guardian(s), ties of the Villages of the undersigned each rs, agents, employees	ration forms should as the case may be f Westminster Swall hereby waive and and representative	Id be submitted to e, hereby consent im Team and exided release the Villes (collectively,	o Corinne Picataggi t to the participation cept for the miscondages of Westminster the "Releases") from	i (6209 SJW.) n of the listed family duct of any of the er Swim Team, its m and against any and	
Parent / Gu	uardian Signature			Pate		

The success of the swim program is dependent on parent and volunteer support. There will be many volunteer opportunities, and families will be required to participate throughout the season. We are a full competitive team this year and will host meets at our pool. Please recruit neighbors to help!