

SwimStrongsville Registration Form

Please return to SwimStrongsville along with your medical, signature and contact, volunteer form and payment.
Please remember to fill out a separate form for each swimmer you are registering.

Swimmer's Name _____
Last Name Legal First Name M.I. Preferred/Nickname
Age _____ Birthday ___/___/___ Grade _____ Gender _____ Phone _____
Parent's Names _____ email _____

Outdoor Season Club Dues are for _____ level

Outdoor Season (6/1-8/13) \$ _____

Outdoor SSL Boost (6/14-7/14 MW only) \$ _____

Outdoor Post SSL (7/19-8/13 M-F) \$ _____

USA 2010 Seasonal Reg Fee: \$28.50 \$ _____

100% sent to USA SWIMMING, Inc.
(Everyone who is not already registered with USA Swimming must pay this-Due with initial payment)

TOTAL \$ _____

SwimStrongsville Waiver and Release

My child has my permission to participate in SwimStrongsville, an affiliate of USASwimming, Inc. In consideration of acceptance of the registration, I waive all claims for myself, heirs, and assigns for damage that may result from my child participating on this team. SwimStrongsville and their representatives will assume no obligation for injuries or damages that I or my child may incur in conjunction with this team.

Signature of Parent or Guardian

Payment is due by May 21, 2010.

All swimmers need to return the Registration Form, Medical Form, Signature and Contact Form and Volunteer Form with payment AND:

Swimmers who have NEVER been registered with USA Swimming need to:

1. fill out and return the USA Swimming Registration Form and
2. submit proof of age, copy of birth certificate or passport.

Swimmers who have EVER been registered with USA Swimming before but SWIM is not their last team need to:

1. fill out and return the USA Swimming Transfer Form

Please mail forms and your check payable to SwimStrongsville to:

SwimStrongsville PO Box 360524 Strongsville, OH 44136