



Athlete Registration (Please Print Clearly)

Swim Team Triathlon Team Both

First: _____ M.I.: _____ Last: _____ M / F Age: _____ D.O.B: ___/___/___

First: _____ M.I.: _____ Last: _____ M / F Age: _____ D.O.B: ___/___/___

First: _____ M.I.: _____ Last: _____ M / F Age: _____ D.O.B: ___/___/___

(1) Parent's / Legal Guardian's First Name: _____ Last Name: _____

Mailing Address: _____
Street City Zip

E-Mail Address: _____

Home: _____ Business: _____ Cell: _____

(2) Parent's / Legal Guardian's First Name: _____ Last Name: _____

Mailing Address: _____
Street City Zip

E-Mail Address: _____

Home: _____ Business: _____ Cell: _____

Medical Information

Doctor: _____ Dentist: _____

Insurance: _____

Special Needs / Allergies / Dietary Concerns / Medications: _____

I have read, understand, and agree to all sections of the *Conditions Of Registration* on the back of this registration. All questions about the policies, activities, and operations of our *Fig Garden Swim & Triathlon Team* have been answered to my satisfaction.

Print Name: _____ Signature: _____ Date: _____

Conditions Of Registration

I, the signing parent or legal guardian, hereby apply to register the child, whose name appears on the reverse, in *Fig Garden Swim & Triathlon Team*. By doing so, I acknowledge that I read and agree to the following conditions of registration.

General Matters

- 1) I agree that the child and his / her parents or legal guardians will abide by the rules and regulations set by *Fig Garden Swim & Triathlon Team* for the health, safety, and welfare of the child.
- 2) I understand that *Fig Garden Swim & Triathlon Team* reserves the right to dismiss a child whose conduct is dangerous, illegal, or detrimental to *Fig Garden Swim & Triathlon Team* and / or to other children. I agree that there will be no refund in the event of dismissal.
- 3) I understand that *Fig Garden Swim & Triathlon Team* reserves the right to cancel, change or substitute programs or activities as listed in its *Fig Garden Swim & Triathlon Team* flyer as necessary.
- 4) I consent to the use of any pictures of the child in connection with *Fig Garden Swim & Triathlon Team's* future advertising or promotion.
- 5) I understand that activities will involve swimming. I certify to you that the child can swim adequately to participate safely in such activities and that the child suffers from no physical or medical condition which would make his / her participation unsafe or unusually dangerous to himself / herself or others.
- 6) Parents are required to pick-up their children promptly at the end of practice. If the child will be going home with someone other than you or your spouse, the coach must be notified.

Payment & Cancellation Policy

- 1) Full payment must be submitted with every child's registration.
- 2) The session rates will not be pro-rated.
- 3) There will not be any refunds in connection with cancellations. If a child is unable to attend *Fig Garden Swim & Triathlon Team* due to an emergency or illness, he / she will be able to make it up in another session based on space availability. We make exception for a child who suffers a physical injury or illness and whose doctor certifies to us, in writing, that the injury or illness is of a nature that the child cannot safely participate in any other session. A child who withdraws from a session early due to a doctor certified injury or illness will receive a pro-rated refund. Dismissal from *Fig Garden Swim & Triathlon Team* or withdrawal due to a personal scheduling conflict is not accepted as a basis for refund.

Release Of Liability

I understand and acknowledge that *Fig Garden Swim & Triathlon Team* activities (whether or not listed on the *Fig Garden Swim & Triathlon Team* flyer) have a risk of injury associated with them. I hereby release, and agree to indemnify and hold harmless, *Fig Garden Swim & Racquet Club* and its counselors and representatives whatsoever from any and all losses, claims, damages, liabilities, costs, and expenses (including attorney fees) which a child may sustain or incur in any way arising out of or in connection with the child's participation in any and all session activities.

Medical

In the event of a medical emergency, I hereby give permission to *Fig Garden Swim & Racquet Club* and / or medical personnel, to secure, at my expense, proper treatment, as necessary, for the child named on the reverse side. I understand that all reasonable efforts to contact me will be made should an emergency arise.

