

Manheim Summer Swim Team

2021 Registration Form

Swimmer's Names	Birthdate	Age as of JUNE 1	Male or Female	Fee

Total Swimmer Fees _____

Parent Contact Information (Please Print Clearly)

Mother's Name _____ Father's Name _____

Address _____

Mother's Primary Phone _____ Father's Primary Phone _____

Email Address(es) _____

Emergency Contact (other than listed above) _____

Emergency Contact's Phone _____ Relationship to Child _____

Medical Concerns or Allergies? _____

MEDICAL CONSENT: In case of medical emergency, I understand every effort will be made to notify parent and emergency contacts for my child(ren). In the event no one can be reached, I hereby give said permission to the Manheim Summer Swim Team board of officers and coaches to secure proper treatment for, hospitalize, and to order injection or anesthesia or surgery for my child.

Parent/Guardian Signature _____ Date _____

Family Physician _____ Phone _____

Medical Provider _____ Policy/Group # _____

LIABILITY: I hereby give permission for the above stated swimmer(s) to participate on the Manheim Summer Swim Team program. In consideration of your acceptance of my enrollment, I the swimmer, and we, the parents, individually and collectively, intending to be legally bound, hereby for ourselves and heirs, executors and administrator, waive and release the Manheim Summer Swim Team, their agents and representatives, from any and all claims or rights to damages for injuries or losses suffered by me, the swimmer, directly or indirectly in training for, or traveling to or from, or competing in or while attending future Manheim summer Swim Team functions. I consent for medical treatment for my child (children) in the event of an emergency.

Parent/Guardian Signature _____ Date _____

Photography Discloser: Consent is needed for the team to take and use the images in public locations such as our website, Facebook page, and team events. Signing below gives consent for the team to utilize the images.

Parent/Guardian Signature _____ Date _____

REGISTRATION FEE: \$100 for first swimmer and \$50 each additional swimmer.

Make checks payable to the Manheim Swim Team.

Due to liability issues, all registrations must be paid in full prior to swimmer's first practice. No swimmer will be allowed in the water without a paid registration. If your child decides not to swim, a refund in full will be given prior to **Friday, June 4th, 2021**. After this date no registration refunds will be given. Swimsuit and clothing orders are non-refundable. **Registration closes Friday, June 4th, 2021**. No registrations will be accepted after this date.

**If you are unable to attend registration, mail all registration forms and registration payment to:
Manheim Summer Swim Team (c/o Kim Hatfield), 16 Frederick Circle, Manheim, PA 17545.**

TEAM USE ONLY

Cash _____ Check # _____ Amount of Registration _____ Total Due _____