

Powhatan Secondary Sea Stars-Summer 2008
Swim Team Registration Form

Parent or Guardian _____ Emergency Contact _____

E-mail _____ Alternate E-mail _____

(All essential news about the practices, meets, social events, etc is sent via e-mail! Be sure to check yours frequently!)

Home phone _____ Alternate Phones _____

Address _____

Would you like to be included in our directory? Y__N__

The fees for swim team are **\$60** for the first swimmer, **\$50** for the second swimmer and a **\$130** maximum fee per family. A swim cap is included in the fee. In order to be eligible for the swim team, you must be a member of the Powhatan Secondary Community Pool for the 2008 season.

<i>Swimmer's Last Name</i>	<i>First Name</i>	<i>Birth date</i>	<i>Age as of June 10th</i>	<i>M/F</i>	<i>Fee</i>

Please make checks payable to Powhatan Secondary Sea Stars *Total \$* _____

Running a swim meet takes help from *all* parents; you are an essential part of the team! Please bring your calendars to the registration so you can plan to sign up for positions to be posted on a master schedule we will have on display for your convenience. There is "something for everyone"! As always we truly appreciate your help; we couldn't do this without you!

Waiver of Liability: On behalf of myself, my family, my heirs, and my assigns, I expressly waive all claims against Powhatan Secondary Community Pool, their agents or representatives on account of any accident, injury, illness or other damage that may occur in connection with, or incident to, any and all swim meets, practices and any function relating to Powhatan Secondary Swim Team. The swimmers registered above are in good physical condition, unless I have stated otherwise on the reverse of this form.

Medical Release: I further grant permission for appropriate medical treatment to be given to my child/children as listed above in an emergency, and will be solely responsible for any medical costs which may arise.

Consent to Photograph: I also grant permission for Powhatan Secondary Swim Team to photograph my child/children at practices, meets, and social events. The photographs may be used in our web site, advertisements, press releases, postings at the pool, etc. Powhatan Secondary will not use my child's last name in conjunction with their photos on the web site.

Parent(s) signatures _____

VPSU RELEASE AND WAIVER OF LIABILITY

The undersigned acknowledge(s) that in 2008, the undersigned, and/or his/her child(ren) or ward(s) identified below, may or will be attending and/or participating in swim practices and meets conducted by the below named swim team ("Home Team"), which is a member of the Virginia Peninsula Swimming Union, a Virginia corporation ("VPSU"), at Home Team's pool, owned and/or operated by Home Team or an affiliated entity ("Home Team Pool Owner/Operator"), in swim meets conducted by other swim teams of the VPSU ("League Teams") at League Team pools, at the VPSU Champs Meet at the pool owned by Eastern State Hospital, Midtown Aquatics Center, or by any other League Team (individually and collectively, "ESH"), and in activities associated with such teams, meets, practices and/or pools (individually, and collectively, such practices, meets, and activities are defined herein as, the "Event" or "Events"). I hereby further acknowledge and recognize that such attendance and/or participation in the said Events can be potentially dangerous and involve certain real and unpredictable risks, including without limitation injury or damage to person and/or property. As lawful consideration for the me and/or my child(ren) or ward(s) (individually and collectively, the "Releasor" and/or "Releasor(s)") being permitted to attend and/or participate in any Event, the undersigned Releasor(s) hereby:

(1) agree(s), if he/she is a parent or guardian, that he/she will not permit any of his/her minor children or wards to attend or participate in any Event unless each is properly trained, medically able, and/or under proper supervision at all times;

(2) agree(s) willingly to assume the risk of any injury to, or death of, any Releasor, and/or the risk of any and all damage to, or loss of, any Releasor's property, caused by any Releasor's negligence or misconduct, and/or the negligence and/or misconduct of the Home Team, any League Team, any Home Team Pool Owner/Operator, VPSU, and/or ESH and/or their respective officers, directors, members, employees, agents, subcontractors, representatives, and/or volunteers (individually, "Releasee" and collectively, the "Releasees"); and

(3) release(s) from any and all liability, and agree(s) not to sue, or make any claim against the Releasees for any and all injuries, deaths, damages, and/or losses, including claims for attorneys fees (collectively, the "Claims") arising from any Releasor's attendance at and/or participation in the Event and/or associated activities, whether or not any Claim was caused by any Releasor's negligence, any Releasee's negligence or misconduct, and/or any other cause.

As lawful consideration for the Releasor(s) being permitted to attend and/or participate in any Event, the Releasor(s) further agree(s) to defend, indemnify and hold harmless, the Releasees from any Claims made by others as a result of any Releasor's negligence and/or misconduct and/or from any Claims made by any parent, guardian and/or next friend of any Releasor. The undersigned hereby represents and warrants that this Release and Waiver of Liability is made by and on behalf of, and shall be effective against, the undersigned, any Releasor under the age of 18, and/or any other parent or guardian of any such Releasor.

The undersigned further agrees that the Releasor(s) will abide by all rules established for the Events, including all safety rules, and any decision of officials of the Home Teams, League Teams, Home Team Pool Owner/Operators, VPSU and/or ESH made in connection with any Event.

THIS IS A RELEASE AND WAIVER OF LIABILITY. DO NOT SIGN OR INITIAL THE RELEASE AND WAIVER IF YOU HAVE NOT READ IT COMPLETELY OR DO NOT UNDERSTAND OR DO NOT AGREE WITH ANY OF ITS TERMS.

HOME TEAM: _____ DATE: _____

Name(s) of Swimmer(s)/Releasor(s): _____

[Signature(s) of Swimmer(s)/Releasor(s) if age 18 or over]

[Signature(s) of Parent(s) or Guardian(s) (if Swimmer(s)/Releasor(s) is/are under age 18)]