

Hearthstone Heatwaves Swim Team 2010 Swimmer(s) Registration Form

Parents:

Last Name _____ First Name _____

Address _____

City _____ / _____ State _____ / _____ Zip _____

Home Phone _____

Mom's Work Phone _____

Dad's Work Phone _____

Emergency Contact _____

EmailAddresses _____

Swimmers:

Last Name _____ First Name _____

MI _____ Preferred Name _____

Birthdate _____ Age _____ Gender _____

Subdivision _____ T-shirt Size _____

Allergies/MedicalProblems _____

Last Name _____ First Name _____

MI _____ Preferred Name _____

Birthdate _____ Age _____ Gender _____

Subdivision _____ T-shirt Size _____

Allergies/MedicalProblems _____

Last Name _____ First Name _____

MI _____ Preferred Name _____

Birthdate _____ Age _____ Gender _____

Subdivision _____ T-shirt Size _____

Allergies/MedicalProblems _____

The Hearthstone Heatwaves occasionally uses photos taken at team events for public relations and our Web Site (www.heatwaves.org) I understand and agree that: 1) Consent and release have been given without coercion and duress, 2) No monetary consideration shall be paid and 3) the photos may be used in subsequent years. Please initial _____.

Registration: \$ _____ \$90 per family

Additional Donation: \$ _____

Heat sheet Ad \$ _____ (1/8 pg \$10, 1/4 pg \$15, 1/2 pg \$25, 1 pg \$45)

Total \$ _____ Make check payable to "Hearthstone Heatwaves"