Hill Farm Swim & Dive Team Registration Form

Team members will not be allowed to practice with the team until this form has been signed and returned to the Hill Farm Swim Club office. Please include any medical concerns that should be brought to the attention of the coaches. A cautionary statement is posted at the pool. Team members and their parents are asked to read and understand certain precautions and responsibilities designed to improve safety and enjoyment of the sports.

Child's Name	Birth Date	T-Shirt Size*	Swim Team	Dive Team	Mini Moos	Age as of 6/1

**T-Shirt size is for "surprise" All-City t-shirt (or season-ending meet for Mini Moos)*

I/We hereby give the above child/children permission to participate on the Hill Farm Swim Club swimming and/or dive team for the current season. In consideration of such participation I/we hereby release from liability the Hill Farm Swim Club Inc., its board of directors, and staff, for any damage to property, injury, or death sustained by my/our child/children as a result of their participation in the swimming/diving programs.

Adult 1 Name: _____ _____ **Date:** _____
(Print) (Signature)

Adult 2 Name: _____ _____ **Date:** _____
(Print) (Signature)

Home/Mobile Phone Numbers:

Adult 1: _____ **Adult 2:** _____

Work/Daytime Phone Numbers:

Adult 1: _____ **Adult 2:** _____

Email Addresses:

Adult 1: _____ **Adult 2:** _____

Emergency Contact Name: _____ **Phone #:** _____

Medical Concerns (circle one)? Yes No

If yes, please describe medical concern: _____

_____

_____