

# 2009 Hillsmere Hammerheads - Registration

Parents' names \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

e-Mail \_\_\_\_\_

Child's Name First, Last, Middle Initial	Sex	Birthday	Age as of 6/1/09	Team Fee \$75.00 *	USA Insurance \$30.00 or winter team	TOTAL
				TOTAL		

\* Maximum "Team Fee" \$175.00 per family. All swimmers must pay the \$30.00 USA Swimming Insurance fee unless they swim with a winter swim team such as ASC or NAAC or RAC. List your team affiliation in the insurance block if claiming this option.

**Make checks payable to: Hillsmere Swim Team.**

**Mail application and payment to: Hillsmere Swim Team, c/o Robin Laird Colley, 109 Magnolia Lane, Annapolis MD 21403**

Volunteers are needed at all the swim meets. There will be a volunteer work assignment sheet at the parents meeting on 13 May. Please select the meet and jobs you will be working when you sign your child/children up. If each family works three sessions we should be able to cover all the positions.

I hereby give permission for the above listed swimmer(s) to swim with the Hillsmere Swim Team at whatever pools are used for scheduled practices or team competition. I will permit my child (children) to travel as necessary for team meets. I agree to hold harmless the Hillsmere Swim Team, Greater Annapolis Swim League and the management of any pools which may be used for practice or swim meets, against suits, actions and claims including those arising from personal injuries which may result from this participation.

