



# SWIM TEAM REGISTRATION 2011

Returning swimmers register by May 17<sup>th</sup> 2011 to ensure your spot at Chick-fil-a, Celebrate Virginia on 3/23 or 4/20. Open registration for all on 5/17. New swimmers will be accepted on a first come, first serve basis pending tryouts. Tryouts will be held at Curtis Park Pool during the first week of practice – May 31, 6-8pm.

## TEAM FEES

NUMBER	RETURNING SWIMMERS		NEW SWIMMERS*
	BEFORE 5/17	AFTER 5/17	
1	\$110	\$115	\$115
2	\$170	\$180	\$180
3	\$210	\$225	\$225
4	\$240	\$260	\$260
5+	\$260	\$285	\$285

**Eligibility:** Swimmers age 5 – 18 years.  
Swimmers must be able to swim 25 yards.  
Beginning swimmers accepted. Age group determined by age as of June 1, 2011.

## REGISTRATION DATA:

	LAST NAME	FIRST NAME	MI	M/F	DATE OF BIRTH	AGE AT JUNE 1	MEDICAL CONDITIONS *
1							
2							
3							
4							
5							

\*ANY CHILD WITH A MEDICAL CONDITION THAT MAY REQUIRE INTERVENTION MUST HAVE A PARENT IN ATTENDANCE AT ALL FUNCTIONS.

## PARENT SIGN-UP:

All families are required to provide one volunteer for a minimum of **three meets plus finals for children to be eligible to swim.**

POSITION (CHOOSE 1)	VOLUNTEER FIRST CHOICE NAME	POSITION (CHOOSE 1)	VOLUNTEER FIRST CHOICE NAME	POSITION (CHOOSE 1)	VOLUNTEER FIRST CHOICE NAME
REFEREE*		MEET SETUP		SECURITY	
STARTER*		MEET TAKEDOWN		RUNNER	
STROKE & TURN*		CONCESSIONS		BOOSTER SALES	
DATA ENTRY*		SCORING		SOCIALS	
CLERK OF COURSE*		TIMER		RIBBONS	
ANNOUNCER		WEB SITE GURU		RELAY COORD	

Indicate your 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> choice above. **You must choose one position from each column!**  
\*These positions require training. The dates and places for these training sessions will be available on our website  
[www.CurtisParkSeahawks.com](http://www.CurtisParkSeahawks.com)

## Please provide the following information:

Parent Name \_\_\_\_\_ Address \_\_\_\_\_

Parent Name \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Curtis Park Swim Team reserves the right to dismiss any swimmer whose behavior is found to be detrimental to the team. Likewise, CPST reserves the right to dismiss any swimmer whose parent(s) behavior is found to be detrimental to the team. If a parent has a concern, please direct it to a board member who will assist them with our grievance procedure. Each family must turn in Parent and swimmer Code of Conduct and submit with this registration form. **NO REFUNDS** will be issued at all unless physically unable to swim as certified by a medical doctor or a new swimmer refund is requested by 6 June, 2011.

All parents/guardians must complete waiver/release of liability form for **each swimmer** prior to participation in ANY team event.

**Parental consent:** I hereby give permission for my child/children to participate in the Curtis Park Swim Team, a Stafford County swim team in the RSL. All swimmers, coaches and parents must obey the Code of Conduct established by CPST Inc.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Tryout needed: \_\_\_\_\_ Check number: \_\_\_\_\_ Amount: \_\_\_\_\_ Date: \_\_\_\_\_