



SWIMMERS WITH ALTITUDE!

PO Box 61
Rollinsville, CO 80474
PeakToPeakSwimTeam.com

2012 MASTERS' WINTER SEASON REGISTRATION FORM

Welcome Masters' to our 2012 Winter Season. Our season begins on January 7 and ends mid-April. All practices are at the Gilpin County Recreation Center and according to the online schedule. Please check the team's website for practice times. This form can be used to register all participating Masters' swimmers in your family. In addition to this registration form, please complete the annual Release of Liability form and submit a \$10 annual insurance fee for EACH participating swimmer.

GO PIRANHAS!!!

Swimmer Information:	First and Last Name	T-shirt Size	Date of Birth
Swimmer #1:	_____	_____	____/____/____
Swimmer #2:	_____	_____	____/____/____
Contact Information:			
Home Phone:	_____	Cell Phone: _____	Work Phone: _____
Street Address:	_____		Zip Code _____
Mailing Address:	_____		Zip Code _____
Email Address:	_____		
Medical Insurance:	_____	Subscriber #:	_____
Alternate Emergency Contact (name and phone): _____			

Waiver of Liability: I represent and warrant that I/we as listed above are in good health and have no physical conditions, ailments, or disabilities, which could endanger my/our health or safety if I/we were to participate in vigorous physical activity. For and in consideration of the benefits derived from my/our participation in the Peak to Peak Masters' program, I assume all risks and hazards incidental to such participation, including transportation to and from such activities, and do hereby indemnify, release and hold harmless the Peak to Peak Swim Team, its officers, directors, employees, and agents from all claims of any kind whatsoever, which may arise or hereafter accrue in connection with the participation in the activities of Peak to Peak Masters.

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

Consent to Photograph: I also grant permission for Peak to Peak Masters' to photograph myself/us at practices, meets, and social events. The photographs may be used in our website, advertisements, press releases, posting at the pool, etc. Peak to Peak Masters' will not use my/our last name (-s) in conjunction with a photograph on the website.

Signature: _____ Date: _____

Team Administration Use Only: Release of Liability Received Date: _____

Payment Received Date: _____ Amount: \$ _____ Check # _____ Initials: _____

