

Sundance Aquatic Association

Annual Registration Form

ONE FORM PER SWIMMER – PLEASE PRINT

Swimmer's Name _____ Club Name _____

Age Group _____ Gender (M/F) _____ Birth Date _____ Parent Phone Number _____ Email Address _____

PLEASE READ CAREFULLY BEFORE SIGNING.

THIS IS A RELEASE OF LIABILITY AND WAIVER OF CERTAIN LEGAL RIGHTS.

All Sundance Swimmers and Parents/Guardians are to complete and sign below. This form is to be turned in to your Coach/Parent Representative by **first day of swimming or June 1**. Swimmers with incomplete forms will not be eligible to participate in District meets or the Championship meet.

REGISTRATION:

According to **ARTICLE 6** of the Sundance By-Laws, no individual swimmer may compete in Sundance District meets or the Championship Meet if he/she:

- Has practiced with or swum in a USA Sanctioned meet with an organized competitive swim program on or after MARCH 1st (or the completion of the USA State Championships, whichever is later) of each year. An individual swimmer also may not compete "unattached" at a USA sanctioned meet during the time frame of March 1st (or completion of the USA State Championships, whichever is later) to the end of the Sundance Championships;
- Participates in a year-round program during the Sundance season before the conclusion of the last event of Sundance Championship Meet; or
- Cannot provide written proof of termination of year-round swim team participation as of March 1st (or the completion of the USA State Championships, whichever is later) of the current year.

WAIVER/RELEASE OF LIABILITY:

The parent/guardian as signed below, or the enrolled participant if over the age of 18 years, of the above-named swimmer, agree and understand that swimming is a HAZARDOUS activity. The parent/guardian or enrolled participant recognizes that there are risks inherent in the sport of swimming, including but not limited to, paralyzing injuries and death. The participant hereby agrees to participate in Sundance Swimming and the participant and the parent/guardian of the participant hereby agree to indemnify and hold harmless the Sundance Aquatic Association, its coaches, officers, directors, agents, and employees against any liability resulting from any and all injury that may occur to the participant while participating in Sundance Swimming. The participant and the parent/guardian of the participant also agree to indemnify the Sundance Aquatic Association for any damages incurred or causes brought against the Sundance Aquatic Association, its coaches, officers, directors, agents, and employees arising from any claims, demand, action or cause of action by the participant. The participant and the parent/guardian of the participant authorizes any representative of the Sundance Aquatic Association to have the participant treated in any medical emergency during their participation in any Sundance Swimming activity. Further, the participant and/or parent/guardian of the participant agrees to pay all costs associated with medical care and transportation for the participant. The following are medical/health problems of which the coach and assistant coaches should be aware of:

I, parent and/or guardian named below, of Sundance Swimmer named above, do hereby certify that he/she is in direct compliance with the individual swimmer's qualifications as stated in the Sundance Aquatic Association By-laws, **Article 6**.

I HAVE CAREFULLY READ THE ABOVE LIABILITY RELEASE AND SIGN IT WITH FULL KNOWLEDGE OF ITS CONTENTS AND SIGNIFICANCE.

Parent/Guardian Name, Printed

Parent/Guardian Signature

Date

The above-named parent/guardian gives permission for the above-named child's photo to be used on a team or Sundance Aquatic Association website or printed material. **INITIAL HERE TO AGREE** _____

The named swimmer above as a registered Sundance Swimmer, understands the eligibility rules and is in compliance with these rules.

USA Coach Signature if applicable