ONE FORM PER SWIMMER – PLEASE PRINT

Swimmer's Name				Club Name	
Age Group	Sex M/F	Birth Date ¹		Email Address	
Sundance Sw	immers and Par ve by <mark>June 1, 20</mark>	rents/Guardians ar	re to complete and sign b	BILITY AND WAIVER OF CERTAIN LEGAL RIGHTS. All below. This Form is to be turned in to your Coach/Parent not be eligible to participate in inter-team meets or the	
		o ARTICLE X of the nship Meet if he/s		individual swimmer may compete in Sundance inter-	
 Has p 1st (omage) 	oracticed with corthe completing of the completing of the compete "u	or swum in a USA son of the USA Sta	canctioned meet with an te Championships, whic SA sanctioned meet duri	organized competitive swim program on or after March hever is later) of each year. An individual swimmer alsoing the time frame from March 1st (or completion of the Sundance Championships;	
	cipates in a yea		during the Sundance seas	son before the conclusion of the last event of Sundance	
 Cann 	ot provide writ	ten proof of termi	nation of year-round swi hever is later) of the curi	im team participation as of March 1st (or the completion rent year.	
participant he agents, and e in Sundance S Aquatic Associarectors, age participant ar have the participar the participar the participar l, parent and/	ereby agree to imployees again with mind and continuous again to the parent/gicipant treated at and/or parent. The followin for guardian na	ndemnify and hold list any liability resi participant and th damages incurred of yees and arising fr uardian of the par in any medical em t/guardian of part g are medical/hea med below, of Sur	d harmless the Sundance ulting from any and all in e parent/guardian of the or causes brought agains om any claims, demand, ticipant authorizes any regency during their paricipant agrees to pay all lth problems of which the adance swimmer named	ning and the participant and the parent/guardian of the Aquatic Association, its coaches, officers, directors, along that may occur to the participant while participating a participant also agree to indemnify the Sundance action or cause of action by the participant. The epresentative of the Sundance Aquatic Association, its coaches, officers action or cause of action by the participant. The epresentative of the Sundance Aquatic Association to tricipation in any Sundance Swimming activity. Further, costs associated with medical care and transportation for e coach and assistant coaches should be aware: above, do hereby certify that he/she is in direct e Sundance Aquatic Association By-laws, Article X.	
I HAVE CAREI SIGNIFICANC		E ABOVE LIABILIT	Y RELEASE AND SIGN IT V	WITH FULL KNOWLEDGE OF ITS CONTENTS AND	
Parent/Guardia	n Name, Printed		 Parent/Guardian Sign	nature Date	
The ab	ove named par	ent/guardian gives	s permission for the abov	ve named child's photo to be used on a team or	
		·	rial. Initials means agre		
The named sy rules.	vimmer above	as a registered Sur	ndance swimmer, unders	stands the eligibility rules and is in compliance with these	
Swimmer's Sign	ature		 Date		
Verified					
USA Coach's Sig	<mark>nature</mark> (If Applica	ıble)	Date		

1Birth certificates may be required upon request of the registered swimmer's team coach. In no event shall a team coach request a birth certificate after July 1st of any year. Nor, shall a birth date be subject to challenge after District Meet of any year. Failure to provide a birth certificate upon request shall disqualify the swimmer from participation in Sundance inter-team, district and final Championship meets.