



### RAINTREE SWIM TEAM 2009 ENTRY FORM

**Swimmers Name:** 1<sup>st</sup> \_\_\_\_\_ Age as of 6/1/09: \_\_\_\_\_ D.O.B: \_\_\_\_\_ M / F  
 2<sup>nd</sup> \_\_\_\_\_ Age as of 6/1/09: \_\_\_\_\_ D.O.B: \_\_\_\_\_ M / F  
 3<sup>rd</sup> \_\_\_\_\_ Age as of 6/1/09: \_\_\_\_\_ D.O.B: \_\_\_\_\_ M / F

**Parent Info: Dad's Name:** \_\_\_\_\_ **E-Mail :** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Phone# (Home)** \_\_\_\_\_ **Cell #** \_\_\_\_\_ **Work #** \_\_\_\_\_

**Mom's Name:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Phone #'s (Home)** \_\_\_\_\_ **Cell #** \_\_\_\_\_ **Work #** \_\_\_\_\_

Raintree Resident Information (complete only if a non-resident – swimmer must have their own pool pass)

**Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_  
**Address:** \_\_\_\_\_

### RAINTREE SWIM TEAM RELEASE

This is to certify that I, parent or legal guardian of \_\_\_\_\_ (the swimmer(s)), members of the Raintree Lake Swim Team (the "Team"), hereby grant permission to the adult manager, coach, and assistants of the Team to obtain medical care from any licensed physician, hospital, or medical clinic for the swimmer(s) named herein at such times as the parents or legal guardian cannot be contacted in person or by telephone. This authorization shall include all league activities, including the period required for travel to and from activities. We do hereby waive, release, absolve, indemnify, and agree to hold harmless the Team, its officers, managers, coaches, supervisors, sponsors, participants, and persons participating in the league and from those activities, from any and all claims, actions, causes of action or damages arising out of or relating to any injury to the Swimmer(s).

Signature of Parent/Legal Guardian \_\_\_\_\_ Name of Parent /Legal Guardian \_\_\_\_\_ please print

Relationship to swimmer(s) \_\_\_\_\_

Emergency Contact Person and Phone # \_\_\_\_\_

Please describe any medical conditions that the swim coaches should be aware of:

**Entry Fee\*:** \$85.00 - 1<sup>st</sup> swimmer      1<sup>st</sup> swimmer @ \$85.00 = \_\_\_\_\_ T-shirt size: (circle one) YS / YM / YL / AS / AM / AL / AXL / AXXL  
 \$80.00 - 2<sup>nd</sup> swimmer      2<sup>nd</sup> swimmer @ \$80.00 = \_\_\_\_\_ T-shirt size: (circle one) YS / YM / YL / AS / AM / AL / AXL / AXXL  
 \$80.00 - 3<sup>rd</sup> swimmer      3<sup>rd</sup> swimmer @ \$80.00 = \_\_\_\_\_ T-shirt size: (circle one) YS / YM / YL / AS / AM / AL / AXL / AXXL

**\*Entry Fee includes T-shirt, one individual picture, team picture and championship entry fees**

Additional T-shirts @ \$10.00 each      \_\_\_\_\_ # @ \$10.00 = \_\_\_\_\_ T-shirt size: (circle one) YS / YM / YL / AS / AM / AL / AXL / AXXL  
 Tank top @ \$10.00 each      \_\_\_\_\_ # @ \$10.00 = \_\_\_\_\_ T-shirt size: (circle one) YS / YM / YL / AS / AM / AL / AXL / AXXL

**Add \$2.00 for XXL** \_\_\_\_\_

**Total Enclosed:** \_\_\_\_\_

**Deadline for Early Bird fee above due May 1<sup>st</sup>, 2009. Late registration until May 20<sup>th</sup> additional \$15.00 per swimmer**

Please make check payable to Raintree Lake Swim Team and drop off at the RLPOA office or mail to  
 Amy Berry, 5111 SW Snowy Egret, Lees Summit, MO 64082, Phone #-537-5307  
[amyberry5307@yahoo.com](mailto:amyberry5307@yahoo.com)