

Activate Billing \_\_\_\_\_  
Group \_\_\_\_\_

**AMBERJAX TEAM REGISTRATION 2008-2009**

Swimmer's Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_  
(Last) (First) (Middle)

Parent's Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Numbers: (mom) \_\_\_\_\_ (dad) \_\_\_\_\_

Business Name, Address and Phone Number:

Father: \_\_\_\_\_ Phone: \_\_\_\_\_

Mother: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact Name and Phone Number: \_\_\_\_\_ Phone: \_\_\_\_\_

Previous Experience: \_\_\_\_\_ School Attending: \_\_\_\_\_ Grade: \_\_\_\_\_  
(Place) (# of Years)

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<b>Fee Structure</b>	<b>Monthly</b>	<b>Quarterly</b>	<b><u>Quarterly Schedule</u></b>
Age Group I	\$50.00	\$130.00	August - October
Age Group II	\$60.00	\$160.00	November - January
Age Group III	\$70.00	\$190.00	February - April
Junior/Senior Level I	\$80.00	\$220.00	May - July
Junior/Senior Level II	\$100.00	\$280.00	
Masters	\$30.00		
Saturday Splashers	\$30.00		

Additional Athletes: 1/2 price (first swimmer shall be considered the one in the higher monthly dues bracket)

Registration Fee: \$200.00 per swimmer or \$250 per family  
USA Swimming Annual Registration Fee: 55.00

AMOUNT ENCLOSED WITH REGISTRATION: \_\_\_\_\_

I hereby give my child permission to participate on the Amberjax Swim Team. I understand and take responsibility for the above cost as described by the team.

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

We, the undersigned, understand that the AmberJax will use prompt diligence to notify us in the event of an Emergency during practice sessions or swim meets. In the event that we cannot be reached we give our Permission to authorize whatever emergency treatment deemed necessary. We further agree not to hold the AmberJax, their coaching staff, or the owners of the swimming facility liable for any injury sustained by The swimmer and agree to pay any reasonable cost related to or incurred by the swimmer.

PARENT/GUARDIAN: \_\_\_\_\_