



## Registration Form 2011-2012

### Swimmer Info

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender: Male Female Date of Birth: \_\_\_\_\_ (ie May 1,2000)  
Month/ Day /Year

### Medical Information

Do you have any medical conditions? No Yes Health Card Number: \_\_\_\_\_

If yes, explain:

### Parent Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Email: \_\_\_\_\_ Work Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Relationship to Swimmer: \_\_\_\_\_

### History

First year joined a swim club: \_\_\_\_\_

At what pool did you learn to swim: \_\_\_\_\_

Which lesson program were you a part of:

Red Cross  YMCA  Lifesaving  Other: \_\_\_\_\_

What school do you currently attend: \_\_\_\_\_

### Tier

Regional/National  Tier 4  Tier 3  Tier 2  Tier 1  Jr Dolphin

I, Parent/Guardian of \_\_\_\_\_ certify that I allow my son/daughter to participate in the Summerside Dolphin Swim Club and that I absolve the Summerside Dolphin Swim Club, Coaches and Executive from any blame or responsibility for accident or injury to this above name, while a swimmer or spectator in this program or while traveling to or from activities on or off Prince Edward Island.

Parent Consent: \_\_\_\_\_ Date: \_\_\_\_\_

Signature

### T-Shirts

Please provide shirt size of your swimmer as each swimmer on the team will receive a t-shirt compliments of the Summerside Dolphin Swim Club.

Child Large  Adult Small  Adult Medium  Adult Large  Adult X-Large

Registrar will fill in  
Swimmer ID Number: