

VICTORIA SYNCHRO CAMP REGISTRATION FORM



Swimmer / Athlete Name: . _____

Date of Birth: _____

Female Male

I would like to register the above swimmer/athlete for:

2019 Summer Synchronized Swimming Camp at Saanich Commonwealth Place



SELECT CAMP DATES:

July 8-12, 2019

August 19-23, 2019

Please indicate camp T-Shirt Size: Youth Small Youth Med Youth Large

Athlete /Swimmer Contact Information:

Home Address:		City:	Postal Code:
Home Phone Number:			
Mother's Name:		Work Phone:	
Mother's Email:		Cell Phone:	
Father's Name:		Work Phone:	
Father's Email:		Cell Phone:	
Emergency Contact name:		Phone Number:	
Relation:		Cell Phone:	

Swimming History:

<i>Last Swim Level Achieved:</i>		How did you hear about Victoria Synchro?
<i>Other related activities (ie dance, gymnastics, swim club etc)</i>		

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Photo & Video Release:

In the course of this activity, pictures and video may be taken and recordings may be made. Please advise us if you are willing to have your child's/ward's photograph or voice used for the promotion of Synchro as outlined below.

I, on my behalf and on behalf of my child/ward _____ give permission to Victoria Synchro to photograph and/or record my child/ward and or my child's/ward's voice on still photographs, motion picture film, audio tape, video, video tape or other digital recordings and to use this material in whole or in part, through the media of television, film, internet, multi-media presentation, radio, audiotape, videotape or in printed or displayed form for the promotion of synchronized swimming. I, on behalf of myself and on behalf of my child/ward assign and transfer to Victoria Synchro any and all rights, including copyright, which I may have or my child/ward may have in this material.

I give permission as set out above:

Print Name:	Signature:	Date:
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I do not give permission:

Print Name:	Signature:	Date:
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Parent/Guardian Agreement and Waiver

I AM THE PARENT OR LEGAL GUARDIAN of _____ (the "swimmer"). I certify to Victoria Synchro (the "club") that all of the information provided above is true and complete and, if this application is accepted by the club:

1. I PROMISE TO OBSERVE the rules and regulations of the club and ensure the swimmer does the same.
2. I AGREE WITH THE CLUB TO PAY the swimmer's fees and all other costs of the swimmer's participation including (but not necessarily limited to) equipment costs.
3. I AND THE SWIMMER HEREBY RELEASE THE CLUB from any claim that I or the swimmer may have, against the club, as a result of any injury (including death) to myself or the swimmer, or the loss of damage to our property whether or not caused by the negligence of the club.

I have signed and submit this application for myself and the swimmer this _____ DAY OF _____ in the YEAR _____.

Print Name: _____ Signature: _____