



Newport Beach Tennis Club

2018 SWIM TEAM FALL REGISTRATION FORM

FALL SWIM TEAM 2018

		<i>Please Print Clearly</i>	
Member/Guest Information	Member's/Guest Last Name		Club #
	Mother's First Name		Father's First Name
	Address		City Zip Code
	Mom's Cell Number		Dad's Cell Number
	e-Mail Address		Additional Contact Information
Swimmer 1	Swimmer's First Name		Swimmer's Last Name
	Birthdate (Month / Day / Year)		Age
	<input type="checkbox"/> Daughter <input type="checkbox"/> Son <input type="checkbox"/> Grandkid	<input type="checkbox"/> Circle one <input type="checkbox"/> MON & WED <input type="checkbox"/> TUE & THU	
Swimmer 2	Swimmer's First Name		Swimmer's Last Name
	Birthdate (Month / Day / Year)		Age
	<input type="checkbox"/> Daughter <input type="checkbox"/> Son <input type="checkbox"/> Grandkid	<input type="checkbox"/> Circle one <input type="checkbox"/> MON & WED <input type="checkbox"/> TUE & THU	

2018 FALL FEE SCHEDULE		8 WEEKS	
<input type="checkbox"/>	FALL (member) 9/10 to 11/1	\$255 per Swimmer	<i>If received by August 10</i>
<input type="checkbox"/>	FALL (non-member/groupon) 9/10-11/1	\$275 per Swimmer	<i>If received by August 10</i>
<input type="checkbox"/>	FALL (member) 9/10 to 11/1	\$275 per Swimmer	<i>If received after August 10</i>
<input type="checkbox"/>	FALL (non-member/groupon) 9/10-11/1	\$295 per Swimmer	<i>If received after August 10</i>

CIRCLE ONE - Mondays & Wednesdays or Tuesdays & Thursdays
4:30 – 5:20pm

MINIMUM OF TEN SWIMMERS REQUIRED

Drop in rate: \$20/day for members \$22/day for non-members

9/10	9/11	9/12	9/13	9/17	9/18	9/19	9/20	9/24	9/25	9/26	9/27	10/1	10/2	10/3	10/4
10/8	10/9	10/10	10/11	10/15	10/16	10/17	10/18	10/22	10/23	10/24	10/25	10/29	10/30	10/31	11/1

SWIMMERS ARE REQUIRED TO WEAR SWIM SUIT & GOGGLES AT EACH PRACTICE
INTRA-SQUAD MEET DURING PRACTICE ON NOVEMBER 1st

Cancellation Policy – Full refund minus a \$25 processing fee will be made if swim team session is canceled two weeks prior to the start of that session. Refunds of 50% of the balance after processing fee will be made for sessions canceled less than two weeks prior. No refunds after September 10th.

	/ / 2018		
Member's/Guest's Signature	Date	Total Amount	Member # or Check #

**CONTACT US AT NBTC.SWIM@GMAIL.COM OR
 CALL COACH LIZ 949-922-2761 or COACH MILAN 562-400-2521**

Waiver and Release of Liability

In consideration of being allowed to participate in any way in the NBTC swimming programs and related events and activities, the undersigned: Acknowledge and fully understand that each participant will be engaging in activities that may involve some risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence, but the action, inaction or negligence of others, the rules of play, or the conditions of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.

Assume all the foregoing risk and accept personal responsibility for the damages following such injury, permanent disability or death.

Release, waive, discharge and covenant not to sue Barracuda Aquatics/WAY WEST SPORTS, INC, NBTC, it's respective administrators, directors, agents, coaches and other employees of the organization and if applicable, owners and leasers of premises used to conduct the event. We release liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part.

We have read the above waiver and release, and understand that we have given up substantial rights by signing it and sign it voluntarily.

_____ / _____ / _____
Member's/Guest's Signature

_____ / _____ / _____
Date