

Seahawks Registration Form



Parents Name: _____ Email Address: _____
Cell Phone #: _____ Home Phone #: _____
Address: _____ City: _____ St: _____ Zip: _____

1	First Name	Middle Name	Last Name	Gender	T-Shirt Size	Birth Date Month/Day/Year	Level (filled out by coach)
2							
3							
4							
5							

What outside of the pool activities does your family like to do to have fun?

What are your swimmers expectations for this swimming season?

The Seahawks Swim Club is a non-profit organization with a great coaching staff. As we get started we will need some help with different functions of the team. If we can have parents volunteering in areas of their strengths the Seahawks can achieve amazing things. What are your strengths? Event planning, back office admin, volunteer coordination, or something else?

Insurance Waiver, Emergency Medical Care Policy, Picture Policy, Indemnity and Hold Harmless Agreement



PLEASE READ CAREFULLY BEFORE SIGNING

Welcome to the Seahawks Swim Club. For liability purposes, we are asking each parent to sign the following form, providing their agreement to the policy:

- By signing this form, I agree not to hold the Seahawks Swim Club or sponsoring organization or any of their members or trustees, liable for any injuries that may occur to my child(ren) while participating in the teams activities.
- I authorize the Coaching staff to select and secure medical attention including any medical transport as may be necessary for my child as a result of injuries or other events requiring emergency care while I/we are not in attendance at such event.
- I hereby release said coaches or organizers from any and all liability on account of such selection or authorization for any and all damages which occur on account thereof.
- I realize that this team and it's organization do NOT provide insurance protection and that my child is participating at their own risk.
- I give The Seahawks Swim Club permission to use pictures of my child(ren) on social media and team material for purposes of marketing and documenting the team's activities. ___ Check here if do not consent to use of pictures.

I _____ (parent's name) agrees to indemnify and hold harmless the Seahawks Swim Club and it's employees/volunteers, from and against all claims, damages, losses and expenses, including attorneys fees in case it shall become necessary to file an action arising out of performance of the work herein which is (1) for personal or bodily injury, illness or death, or for property damage, including loss of use, and (2) caused in whole or in part by _____'s (children's names) negligent act or omission or that of a subcontractor, or that of anyone employed by them or for whose acts contractor or subcontractor may be liable.

This indemnification and agreement shall apply in all instances whether the Seahawks Swim Club is made a party to the action or claim or is subsequently made a party to the action by third-party in-pleading, or is made a party to a collateral action arising in whole or in part from any of the issues emanating from the original cause of action or claim.

I have read and do understand the insurance waiver, emergency medical care policy, indemnity and hold harmless agreement herein and I agree to abide by and adhere to it's terms.

By: _____ (signature of parent) Date: _____

Emergency Phone Number: _____

Medical Insurance Co. and ID#: _____

Metroplex Seahawk Swim Club
205 Rec Plex Drive, O'Fallon, IL 62269
618-670-6141