

2010 RAVENEUX RACERS SWIM TEAM

REGISTRATION PACKET

_____ Registration Form

_____ Volunteer Form

_____ Swim Cap Order Form

_____ Waiver

_____ Sponsor Form

_____ Your Payment

Returning Raveneaux Racers – may contact Debbie Donahue to turn in
Registration Packet prior to April 18 or turn in Registration Packet in person on April 18 from 12:00 – 3:00pm
Debbie Donahue, donahuecam@aol.com 832-656-0971

NEW Racers – must turn in Registration Packet in person on April 18 from 12:00 – 3:00pm

www.Raveneaux-Racers.com

RAVENEUX SWIM TEAM REGISTRATION 2010

Parent or Legal Guardian _____ Home # _____

Raveneaux Member Number _____ Returning ___ NEW ___ Cell # _____

Address _____ City _____ Zip _____

Subdivision _____ Primary email _____

SWIMMER'S NAMES	SEX	*TSHIRT	AGE AS OF 6/1/10	BIRTHDATE	MEDICAL CONDITIONS
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1. _____

2. _____

3. _____

4. _____

*T-shirt Sizes: YM, YL, AS, AM, AL, AXL

Physician: _____ Telephone # _____

In Case of Emergency notify:

1. _____ Telephone # _____

2. _____ Telephone # _____

I (we) agree to abide by the rules and regulations of the swim team. We do not have a pool membership with any other NWAL club. My children will not participate in USS swimming competition during the 2010 NWAL season.

Parent or Guardian Signature _____

Each family **MUST** be available to work **EVERY** meet, including the Time Trial Meet on May 7th. If your child is unable to attend the Time Trial meet, you **MUST** notify the coaches in advance.

FEES: Make check payable to **Raveneaux Racers:**

Registration Fee: 1 child \$ 75 2 children \$140 3 or more \$185 15 – 18 yr olds FREE

Payment Info: Date _____ **Total Amount** _____ **Check #** _____
Registration _____ **Caps** _____

Please fill in referred by or no referral:

REFERRED BY _____ **Returning Member, no Referral** _____

RECEIVED/TURNED IN:

Handbook _____ Registration _____ Waiver _____ Volunteer _____ Cap _____

Volunteer Form

Family Name: _____

Swimmers: 1. _____ Age _____ 4. _____ Age _____
2. _____ Age _____ 5. _____ Age _____
3. _____ Age _____

Home Phone: _____

Mom's Cell: _____ Mom's Email: _____

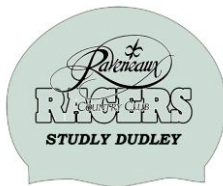
Dad's Cell: _____ Dad's Email: _____

Please list which volunteer opportunities you would prefer for our upcoming season. We will have five (5) meets plus Divisionals. In order to have these meets run smoothly it will take many volunteers; therefore, we will need every family to participate in each meet.

	Mom	Dad	Shift Preference – indicate 1 or 2
Timer:	_____	_____	_____
Scribe:	_____	_____	_____
Runner:	_____	_____	_____
Ready Bench:	_____	_____	_____
Set up:	_____	_____	_____
Take down:	_____	_____	_____
Announcer:	_____	_____	_____
Tent mom:	_____	_____	What age group _____

*Your preference will be considered while we are in the process of putting together our volunteer assignments. Every effort will be made to fit your choice with our needs. Please help us make this the best Raveneaux Racer season ever!!! Feel free to contact Lisa Hardin, 713.882.0332 or tlhhardin@aol.com, if you have any questions regarding volunteering.

Swim Cap Order Form - SAME design & colors as last year!!!



Parent or Legal Guardian _____ Phone # _____

Raveneaux Member Number _____ Email _____

Your registration fee includes (1) free Customized Racer Logo swim cap per swimmer. You have the option to leave as is or upgrade your swimmers cap with individual name personalization (first, last or nickname). There is a minimum order of 2 caps per identical name.

Option A – Customized Racer Logo Cap – NO ind. name – standard Raveneaux Racers \$ FREE

Option B – Upgraded Customized Racer Logo Caps (2) – with individual name on each \$16.00

Below please circle preference for each swimmer:

SWIMMER'S NAME	CIRCLE	Name on Cap (No more than 13 letters)	QTY	TOTAL
1. _____	A	<u>Raveneaux Racers</u> (1)	FREE	
	B	_____ (2)	\$ 16.00	
2. _____	A	<u>Raveneaux Racers</u> (1)	FREE	
	B	_____ (2)	\$ 16.00	
3. _____	A	<u>Raveneaux Racers</u> (1)	FREE	
	B	_____ (2)	\$ 16.00	
4. _____	A	<u>Raveneaux Racers</u> (1)	FREE	
	B	_____ (2)	\$ 16.00	
5. _____	A	<u>Raveneaux Racers</u> (1)	FREE	
	B	_____ (2)	\$ 16.00	

Check # _____ Cash _____ **TOTAL** _____

Contact Kim Pieri 713.818.4331 or KimPieri@comcast.net if you have any questions regarding caps!

NO ADDITIONAL CAP ORDERS WILL BE PLACED after registration, so order NOW!!! 03/13/10 rev

WAIVER AND INDEMNITY AGREEMENT

Acceptance of my entry and participation in the events of the Raveneaux Swim Team is without responsibility of any kind by the Northwest Aquatic League (NWAL) or the Raveneaux Swim Team or any other entity sponsoring a related event. I do hereby for and on behalf of myself, and my heirs and legal representatives RELEASE and forever discharge the NWAL, its officers, directors, representatives, coaches and volunteers from any and all claims, demands, and injuries, howsoever arising, whether caused by the negligent or intentional acts of the NWAL or any of its swim clubs and their representatives, representatives of other sponsoring clubs, or by third parties, which injuries may be in any way related to my activities as a member of the Raveneaux Swim Team and any prior traveling to or from the events described, and all such claims are hereby WAIVED and RELEASED, and I agree not to sue therefore. The parent and guardian, by signing below, does hereby agree to INDEMNIFY and hold harmless the NWAL and its officers, directors, coaches, representatives, volunteers, the sponsoring swim club from any liability which may incur to the participant, however arising and whether caused by the negligent or intentional acts of NWAL, its officers, directors, coaches, representatives, volunteers or Raveneaux Swim Team.

I HAVE READ AND UNDERSTAND THE FOREGOING RELEASE AND INDEMNITY AGREEMENT.

Date _____

Swimmers

Parent/ Guardian

