

2011

RAVENEAU RACERS  
SWIM TEAM

Registration Packet

\_\_\_\_\_ Registration Form

\_\_\_\_\_ Volunteer Form

\_\_\_\_\_ Swim Cap Order Form

\_\_\_\_\_ Waiver

\_\_\_\_\_ Sponsor Form

\_\_\_\_\_ Your Payment

In-person registration on April 10<sup>th</sup> between 12:00-3:00pm on the porch near the Raveneaux tennis courts.

***Come meet Coach Leigh during registration!***

Registration material may also be turned into Rob DeShazer at 16014 Mickelham Drive, Spring, Texas, 77379

[www.Raveneaux-Racers.com](http://www.Raveneaux-Racers.com)

# RAVENEUX SWIM TEAM REGISTRATION 2011

Parent or Legal Guardian \_\_\_\_\_ Home # \_\_\_\_\_

Raveneaux Member Number \_\_\_\_\_ Returning \_\_\_\_\_ New \_\_\_\_\_ Cell # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Subdivision \_\_\_\_\_ Primary email \_\_\_\_\_

SWIMMER'S NAMES	SEX	TSHIRT Size*	AGE AS OF 5/31/11**	BIRTHDATE	MEDICAL CONDITIONS
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1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____

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

\*\* Maximum age 18

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 USA Swimming competition during the 2011 NWAL season.

**Parent or Guardian Signature** \_\_\_\_\_

Each family **MUST** be available to work **EVERY** meet, including the Time Trial Meet on May 13<sup>th</sup>. 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** \_\_\_\_\_

**INFORMATION RECEIVED/TURNED IN:** Handbook \_\_\_\_\_ Registration \_\_\_\_\_ Waiver \_\_\_\_\_ Volunteer \_\_\_\_\_ Cap \_\_\_\_\_

**MONEY RECEIVED:** Registration fee \$ \_\_\_\_\_ Cap amount \$ \_\_\_\_\_ Sponsor amount \$ \_\_\_\_\_ Total \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_

# Volunteer Form

Family Name: \_\_\_\_\_

Swimmers: 1. \_\_\_\_\_ Age \_\_\_\_\_  
2. \_\_\_\_\_ Age \_\_\_\_\_  
3. \_\_\_\_\_ Age \_\_\_\_\_  
4. \_\_\_\_\_ Age \_\_\_\_\_  
5. \_\_\_\_\_ 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 a Divisionals meet. 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 Laura Hargrove, 281-257-9412, or [laurahard@aol.com](mailto:laurahard@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 \_\_\_\_\_

### ***Racer Logo Cap Order Form***

Swimmer	Quantity	Price	Sub-Total	Discount	Total	
1. _____	1	\$6 each	\$6	(\$6)	\$0	_____
2. _____	1	\$6 each	\$6	(\$6)	\$0	_____
3. _____	1	\$6 each	\$6	(\$6)	\$0	_____
4. _____	1	\$6 each	\$6	(\$6)	\$0	_____
5. _____	1	\$6 each	\$6	(\$6)	\$0	_____

**Orders must be received on or before April 17, 2011 to receive discount**

**OR**

You may choose instead to order a personalized Racer Logo Cap  
with the name of your choice (maximum 13 letters) added to a basic Racer Logo Cap

### ***Customized Logo Cap Order Form***

Swimmer	Personalization	Qty	Price	Sub-Total	Discount	Total	
1. _____	_____	2	\$11 each	\$22	(\$6)	\$16	_____
2. _____	_____	2	\$11 each	\$22	(\$6)	\$16	_____
3. _____	_____	2	\$11 each	\$22	(\$6)	\$16	_____
4. _____	_____	2	\$11 each	\$22	(\$6)	\$16	_____
5. _____	_____	2	\$11 each	\$22	(\$6)	\$16	_____

**Orders must be received on or before April 17, 2011 to receive discount**

Date \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_ **TOTAL** \_\_\_\_\_

Contact Heidi Beale, 281-370-0423 or hbeale2000@aol.com if you have any questions regarding caps!

**NO ADDITIONAL CAP ORDERS WILL BE PLACED after May 1, 2011, so order NOW!!!**

**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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_