

LONE STAR AQUATIC CLUB
2009 SPRING SWIM SEASON
 REGISTRATION FORM – Please print clearly

Last Name: _____ Today's Date: _____
 Parents' Names: (Mom) _____ (Dad) _____
 Address: _____ City & Zip: _____
 Home Phone: _____ Work Phone(s): _____ / _____
 E-mail Address(es): _____

YMCA Pool Time Assignments

Group Name	Group Code	Monthly Fee	Days	Time
Novice	N-1	\$45	M/W/F	3:30-4:00
Novice	N-2	\$45	M/W/F	4:00-4:30
Novice	N-3	\$45	M/W/F	4:45-5:15
Novice	N-4	\$45	M/W/F	5:15-5:45
Novice	N-5	\$45	T/TH	4:30-5:15
Novice	N-6	\$45	T/TH	5:15-6:00
Advanced Novice	AN	\$50	T/TH	3:30-4:30
Junior 2	JR2-1	\$55	T/TH	4:00-5:00
Junior 2	JR2-2	\$55	T/TH	5:00-6:00
Junior 3	JR3-1	\$70	M/W/F	3:30-4:30
Junior 3	JR3-2	\$70	M/W/F	4:00-5:00
Junior 3	JR3-3	\$70	M/W/F	5:00-6:00
Junior 3	JR3-4	\$70	M/W/F	6:00-7:00
Junior 5	JR5-1	\$85	M-F	5:00-6:00
Junior 5	JR5-2	\$85	M-F	6:00-7:00
Senior	SR	\$110	M-F	4:30-6:00
High School	HS	\$110	M-F	4:30-6:00
Elite	EL	\$120	M-F	6:00-7:30

USA Swimming MEMBERSHIP FEE: \$65 per swimmer

TEAM SWIMMER REGISTRATION FEE: \$95 per swimmer / Spring Pro-Rated - \$50 per swimmer

	Swimmer #1	Swimmer #2
Swimmer's Full Name		
T-Shirt Size (circle one):	YS YM YL AS AM AL	YS YM YL AS AM AL
Gender & Current Age:		
Date of Birth:		
Group Code:		
Monthly Fee:		
USA Membership Fee:	\$65	\$65
Team Registration Fee:	\$95/\$50 Pro-rated for Spring	\$95/\$50 Pro-rated for Spring
TOTAL DUE		

PLEASE MAKE CHECKS PAYABLE TO "LSAC" (Lone Star Aquatic Club)

Monthly fee are due no later than the 1st of each month. A late charge may be applied to delinquent accounts. Unless you give written notice by the 1st of the month that you are dropping, you are responsible for the entire month's fee.

All fees are non-refundable.

OFFICE USE ONLY

Total Amount Due: _____ Check #: _____ Cash: _____ Today's Date: _____
Total Amount Paid: _____ Balance Due: _____ Initialed: _____

A COPY OF A BIRTH CERTIFICATE MUST BE PROVIDED FOR SWIMMERS REGISTERING FOR THE FIRST TIME WITH USA SWIMMING.

Support LSAC - Shop Anytime for LSAC Apparel and Gifts
See the RockSportsOutlet.com link on our web page



FINANCIAL AGREEMENT

I understand that Lone Star Aquatic Club is a non-profit organization working hard to provide an outstanding, stable, and financially sound competitive swimming program for swimmers of all ages and abilities.

FINANCIAL COMMITMENTS

- Seasonal team registration fee
- Annual USA Swimming membership fee
- Monthly coaching fee
- Swim Meet fees (if participating)

All fees are non-refundable.

LSAC reserves the right to adjust practice times to meet the overall needs of the program.

A late charge may apply to delinquent accounts and be added to your monthly coaching fees if your monthly payment is not received by the 1st of each month.

Families having more than three swimmers will pay full price for the first three swimmers and one half the regular coaching fee for each of the lowest priced additional, immediate family members.

Swim Meet participation is optional. There are additional fees associated with entering a meet. If choosing to enter swim meets, the meet entry fees must be paid by the required due date.

All of the above is clearly understood and agreed to this _____ day of _____ 2009.

Signature of Parent, Guardian, Custodial Parent: _____

LONE STAR AQUATIC CLUB RELEASE FORM FOR WEBSITE, PRESS RELEASES, DIRECTORY

Lone Star Aquatics asks your permission in granting us the ability to post swimming team photos and swimming action photos of you / your child(ren) on our LSAC website, www.lonestaraquatics.org. We are asking each LSAC swimmer / parent to comply with this request in the hope of maintaining a first-class website with up-to-date information and photos on all team meets and events.

Further, we are asking your permission to use swimming photos of you / your child(ren) in any news releases for local newspapers.

We are also asking your permission to include your name and phone number in a team directory that will only be distributed to team members.

Check the appropriate boxes to grant permission to Lone Star Aquatics to:

- post swimming related photos of myself / my child(ren) on the LSAC website.
- use swimming related photos of myself / my child(ren) as a part of press releases to newspapers.
- include the name and phone number of myself / my child(ren) in the team directory.

Parent or Legal Guardian Signature: _____

Date: _____

LONE STAR AQUATIC CLUB

MEDICAL RELEASE FORM & EMERGENCY INFORMATION – Please print clearly

Last Name: _____ Mom's Name: _____ Dad's name: _____
Address: _____ City: _____ State: _____ Zip: _____
Home Phone: _____ Work Phone: (Mom) _____ (Dad) _____
Emergency Contact Person: _____ Phone: _____ Relation/swimmer _____
Family Insurance Company: _____ Group/Policy #: _____

Swimmer's First Name	Birth Date	Allergic to Any Medication	Other Allergies or Special Problems
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Is swimmer on regular medication? _____ Please list medication: _____

FAMILY DOCTOR: _____ Phone: _____

Address: _____ City: _____

If you are unable to contact the doctor, please accept this letter as your authority to use the doctor on call in the Emergency Room for any necessary emergency medical treatment.

SIGNATURE: _____ **DATE:** _____
Parent or Guardian

I, _____ do hereby give my permission and approval for participation for the above
Parent / Guardian of Above Listed Child(ren)
named child(ren) in any and all activities sponsored by Lone Star Aquatic Club and I assume all risk and hazard incident to my / my child's(ren's) participation, including transportation to and from such activities. Accordingly, I waive, release, indemnify and agree to hold harmless the Lone Star Aquatic Club and it's Coaches, Assistant Coaches, Club Officers, officials, participants and parents from any claim arising out of injury to my child(ren) while participating in any and all activities, including, but not limited to, transportation to and from all practice swim sessions, competitive swim meets and other activities sponsored by Lone Star Aquatic Club.

Furthermore, I know of no impairment or deficiency, physical health or otherwise, that would limit or prohibit my child(ren) from participating in practice swim sessions and competition. I agree to advise and make known to Lone Star Aquatic Club and the Coach of any change in the physical health or any other condition that would limit or prohibit my child(ren) from participating in practice sessions, competitive swim meets, and other activities sponsored by Lone Star Aquatic Club.

SIGNATURE: _____ **DATE:** _____

This form is to be available at all LSAC swimming activities.



USA SWIMMING

2009 ATHLETE REGISTRATION APPLICATION
LSC: SOUTH TEXAS SWIMMING

REGISTRATION DATE OFFICE USE ONLY

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

LAST NAME LEGAL FIRST NAME MIDDLE NAME

PREFERRED NAME DATE OF BIRTH MO. DAY YR. SEX M-F AGE CLUB CODE NAME OF CLUB YOU REPRESENT

FATHER/GUARDIAN LAST NAME FATHER/GUARDIAN FIRST NAME MOTHER/GUARDIAN LAST NAME MOTHER/GUARDIAN FIRST NAME

MAILING ADDRESS

CITY STATE ZIP CODE

AREA CODE TELEPHONE NO.

U.S. CITIZEN? YES NO

ARE YOU A MEMBER OF ANOTHER FINA FEDERATION? YES NO

IF YES, WHICH FEDERATION:

- DISABILITY: A. Legally Blind or Visually Impaired, B. Deaf or Hard of Hearing, C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment, D. Cognitive Disability such as mental retardation, severe learning disorder, autism

- RACE AND ETHNICITY (You may make up to two choices if appropriate): O. Black or African American, P. Asian, S. White, T. Hispanic or Latino, U. American Indian & Alaska Native, V. Some Other Race, W. Native Hawaiian & Other Pacific Islander

MAKE CHECK PAYABLE TO:

SOUTH TEXAS SWIMMING

MAIL APPLICATION & PAYMENT TO:

REGISTRATION FEE table with rows: USA Swimming Fee \$45.00, LSC Fee 20.00, TOTAL DUE \$65.00

USA Swimming occasionally makes its membership list available to its marketing partners. Please notify USA Swimming's Member Services Dept. at 719/866-4578 if you do not wish to receive these mailings.

CHECK IF YOU WOULD LIKE TO LEARN MORE ABOUT USA SWIMMING'S COMMUNITY INITIATIVES

YEAR LAST REGISTERED IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2008, ENTER THAT

CLUB CODE LSC CODE AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB

SIGN HERE X SIGNATURE OF ATHLETE, PARENT OR GUARDIAN



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