



NORTH COAST SWIM CLUB

Annual Athlete Registration--2018

All new and returning swimmers must complete the Club Registration Form and submit it along with the \$35 swim club registration fee. Each swimmer will receive a silicone team cap as part of their registration.

Athlete's Information					
Last Name:		First Name:		Middle Name:	
Preferred Name:		NCSC Status: (please circle one) New Renew Transfer		If a transfer, last club name:	
Date of Birth:		Current Age:		Gender: (please circle one) M F	
Address:		City:		State:	Zip:
Parent/Legal Guardian Information					
Parent/Guardian Last Name:			Parent/Guardian Last Name:		
First Name:			First Name:		
Relationship:			Relationship:		
Address (if different than athlete):			Address (if different than athlete):		
City:	State:	Zip:	City:	State:	Zip:
Home Phone Number:			Home Phone Number:		
Cell Phone Number:			Cell Phone Number:		
Notification Email (NOTE: This email is required and will be used for invoicing and providing Club updates):					
Additional email (optional):			Additional email (optional):		
Emergency Contact Information (list two other than parents/guardians)					
Contact Name(s):			Contact Name(s):		
Home Phone Number:			Home Phone Number:		
Cell Phone Number:			Cell Phone Number:		
Relationship:			Relationship:		

Complete both sides of form

Medical Information (optional)

Does the athlete have any known medical or allergy conditions? (please circle one) Yes No

If yes, please describe: _____

Does the athlete take any prescribed medications? (please circle one) Yes No

If yes, please list: _____

Does the athlete need any special accommodations? If yes, please explain. _____

Physician Name: _____ Physician Phone Number: _____

Name of Health Insurance Company: _____

Policy Number: _____ Group ID: _____

Emergency Medical Release

In the event of a medical emergency, I hereby authorize the North Coast Swim Club coach in attendance to secure any emergency medical treatment for my child until I can be contacted.

Signature of Parent/Guardian

Date

Waiver

I hereby waive and release any and all rights, causes of action, and claims for damages I may have against the North Coast Swim Club for any and all personal injuries or property damage resulting from my or my child's participation in the club's programs and activities.

Signature of member or parent/guardian (if member is under 18)

Date

For Treasurer's Use Only:

- Paid NCSC Athlete Registration Fee
- 2018 USA Swimming Membership obtained
- Received NCSC team cap

Date Received:
