

Lexington Swim Team Registration 2023

Please fill out this form and return via mail (PO Box 153, Lexington, NC 27293), email (lexingtonmarlins@gmail.com), or in person on May 1 at the pool.

Parent(s) Name: _____

Primary Phone Number: _____ Alt. Number: _____

Email Address: _____

Address: _____

*All fees include an LSC swim cap.

Swimmer's Name	Birthdate (include yr.)	Gender	Fee	Total
1.			LSC Members: \$50 Non-members: \$100	
2.			LSC Members: \$50 Non-members: \$100	
3.			LSC Members: \$25 Non-members: \$50	
4.			LSC Members: \$25 Non-members: \$50	
5.			LSC Members: FREE Non-members: \$50	
			Total Amount Due:	

All parents are required to volunteer during at least one swim meet. Please indicate your preferred position below. Descriptions for each position are on the back of this form.

- **Stroke Judge**
- **Timer**
- **Runner**
- **Kid Round-Up**

“By submitting this registration, I acknowledge that swimming has inherent risks and by my signature hereby release and agree to hold Lexington Swim Club, Inc., its members, board of directors, officers, and employees harmless from any and all liability for loss, injury or damages resulting from my and/or my child’s voluntary participation as a member of the swim team (or in case of membership application, as a “member” of Lexington Swim Club.)

Parent signature: _____