

Lake Central Barracudas – Athlete Registration Application – Winter 2009-2010

Please complete an application for each participating swimmer

INFORMATION REQUIRED FOR USA SWIMMING PLEASE PRINT LEGIBLY and 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	
						LCB	Lake Central Barracudas	
FATHER'S LAST NAME		FATHER'S FIRST NAME		MOTHER'S LAST NAME		MOTHER'S FIRST NAME		
MAILING ADDRESS								
CITY				STATE		ZIP CODE		
AREA CODE		TELEPHONE NO.						

- 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):
- Q. Black or African American
 - R. Asian
 - S. White
 - T. Hispanic or Latino
 - U. American Indian & Alaska Native
 - V. Some Other Race
 - W. Native Hawaiian & Other Pacific Islander



IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2009, ENTER THAT CLUB CODE _____ AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB __/__/__.

SIGN HERE x _____
SIGNATURE OF ATHLETE, PARENT OR GUARDIAN

INFORMATION REQUIRED FOR LAKE CENTRAL BARRACUDA SWIM CLUB

Parent/Guardian Cell Phone Numbers

Name _____	Name _____
AREA CODE	TELEPHONE NO.
AREA CODE	TELEPHONE NO.
AREA CODE	TELEPHONE NO.

Email Address (used for club updates only)

T-Shirt Size (YS, YM, YL, AS, AM, AL, AXL, AXXL) _____

Performance Level

Typically, returning barracudas start the season in the level they last participated, and new barracudas start in Copper. Please see Coach Jeff if you have any questions. Thank you.

 Silver

 Bronze

 Copper

Lake Central Barracudas
Parental Consent and Release
Winter Season 2009-2010

For and in consideration of the instruction, training, physical conditioning and education benefits offered to my children through age group swimming, by the Lake Central Barracudas, Inc., I hereby release the Lake Central Barracudas, Inc. its officers, agents, servants and employees, including instructors and coaches from all liability from the undersigned, my children, heirs, assigns and next of kin, for all loss or damage and any claims or demands on account of injury to myself or my children, resulting in death or injury to myself or my children, whether caused by negligence of the releases, or otherwise, while the undersigned or their participating children are in, about, or around facilities used by the Lake Central Barracudas for instruction, training, meets or club activities. I further certify that my participating children are in good physical condition, that I have consulted with my family physician or a physician of my choosing concerning their participation in the sport of Age Group Swimming, and I am satisfied that they are physically capable of participating in this swim program. The undersigned are the parent(s)/Legal Guardian(s) of the participating children, have read and fully understand the nature of this document and the Legal effect hereof. This signature is a release for all my children participating in the Lake Central Barracudas, Inc.

Children participating in the Lake Central Barracudas

Signature of parent/guardian

Date

LCB Picture Policy

From time to time, we put photos of our swimmers on the LCB website. If you prefer not to have your swimmers photo included on our website, please send an email to President@LCBswim.com identifying your swimmers name and request that they not be included in web photographs. If you do not have email, please give your written request to the Head Coach or any LCB Board member. Thank you.

Lake Central Barracudas
2009-2010 Winter Season Fee Schedule

	Dues	Total w/Candy Sales option	Total w/Buy Out option
<u>1 swimmer</u>			
Copper	282	386	334
Bronze	322	426	374
Silver	372	476	424
<u>2 swimmers</u>			
C-C	541	645	593
C-B	581	685	633
B-B	617	721	669
C-S	631	735	683
B-S	667	771	719
S-S	712	816	764
<u>3 swimmers</u>			
C-C-C	723	827	775
C-C-B	763	867	815
C-B-B	799	903	851
C-C-S	813	917	865
B-B-B	799	903	851
C-B-S	849	953	901
B-B-S	849	953	901
C-S-S	894	998	946
B-S-S	894	998	946
S-S-S	894	998	946

NOTES:

Please make checks payable to **LCB**

Swimming dues include mandatory USS swim card

Fundraising obligation per family (reflected in the Totals above)

\$104 if selling candy. Please note that you retain the \$104 in sales proceeds.

\$ 52 if you prefer the "Buy out" option

The following payment schedule is available upon request:

1/2 total - paid at registration

1/4 total - provide check dated Nov-15-09 at registration

1/4 total - provide check dated Dec-15-09 at registration