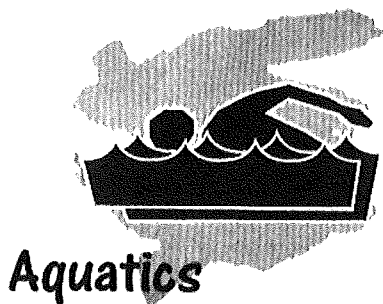




SWIM-A-CROSS

**SPONSOR
SHEET**

A fund-raising event for all ages.

LAST NAME	FIRST NAME	T-SHIRT SIZE
		YMYLSMLXL
STREET ADDRESS		
CITY	STATE	ZIP CODE
	AGE	SEX

Team Name: _____

	NAME	ADDRESS	CITY	STATE	ZIP	PHONE	PLEDGE PER LENGTH	TOTAL AMT. PLEDGED
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								

SPONSOR: We suggest a minimum pledge of 10¢ per length. Please do not pledge fraction of cents. Your cooperation in making advance payment is appreciated. Your gift is tax-deductible, and will be used to purchase water safety education materials.

PLEASE make check payable to: **RED CROSS SWIM-A-CROSS**

Total Amount Pledged	\$	_____
Amount Enclosed	\$	_____
Balance Due	\$	_____

Lengths Completed _____ Validated By _____

Additional sheets available by calling (713) 526-8300



**American
Red Cross**

On behalf of myself, my heirs, executors, administrators and assigns, I hereby waive and release any and all rights and claims for damages which I may have against you, the municipalities through which the events will take place, as well as any other person, organization or corporation who are providing services, or assistance to the American Red Cross event or are connected with the event for any and all injuries which I may incur while taking part in the event or as a result of thereof.

Swimmer's Signature _____

Parent/Guardian Signature _____

WWW.HOUSTONREDCROSS.ORG

Please turn white copy in with money.

Participants under the age of 18 must have the application signed by a parent or guardian.