

Edinburgh Marlins Swim Team

2010 Registration Form

Please Note: Separate checks required for (a) Registration fee and (b) Apparel order

Family Information

Family Last Name: _____ Home Phone #: _____
 Mom's First Name: _____ Dad's First Name: _____
 Mom's Mobile: _____ Dad's Mobile: _____
 Mom's E-mail: _____ Dad's E-mail: _____
 Street Address: _____ Edinburgh Resident? Yes No
 City: _____ If no, Subdivision? _____

1st Athlete Information

First Name: _____ Middle Name: _____
 Last Name: _____ Nickname: _____
 Date of Birth: _____ Gender: _____
 Mobile #: _____ E-mail: _____
 Previous swimmer with the Edinburgh Marlins? Yes No → Birth Certificate?
 If no, previous swimmer in the Gwinnett County Swim League? Yes No What Team? _____

2nd Athlete Information

First Name: _____ Middle Name: _____
 Last Name: _____ Nickname: _____
 Date of Birth: _____ Gender: _____
 Mobile #: _____ E-mail: _____
 Previous swimmer with the Edinburgh Marlins? Yes No → Birth Certificate?
 If no, previous swimmer in the Gwinnett County Swim League? Yes No What Team? _____

3rd Athlete Information

First Name: _____ Middle Name: _____
 Last Name: _____ Nickname: _____
 Date of Birth: _____ Gender: _____
 Mobile #: _____ E-mail: _____
 Previous swimmer with the Edinburgh Marlins? Yes No → Birth Certificate?
 If no, previous swimmer in the Gwinnett County Swim League? Yes No What Team? _____

Would you like to make a contribution to the Edinburgh Swim Team? \$10 \$25 \$50 \$ _____ (Other)



of swimmers ages 4 - 12 _____ x \$ 115
 # of swimmers ages 13 & 14 _____ x \$ 50
 # of swimmers ages 15 - 18 _____ x \$ 50
 Non Resident Fee Per Family _____ x \$ 25
 Total: \$ _____

**Gwinnett County Swim League (GCSL)
2010 Liability Waiver & Release Form**

GCSL Member Team: **EDINBURGH MARLINS SWIM TEAM**

Name of Participant: _____

Age _____ Address _____

I desire to participate in the 2010 Gwinnett County Swim League which includes but is not limited to my Member Team's activities such as practices, dual meets and the GCSL Championship Meet and related activities.

In consideration of my participation, I certify that I am in good health and have no physical or other impediment which would endanger me while participating in these activities and that I have been released and authorized by my doctor to participate in the activities of the swim league. I acknowledge and agree these activities have inherent risks. I have full knowledge of the nature and extent of all the risks associated with these activities which include serious injury and death. Swimming can result in serious injury and death from diving incidents, diving off of starting blocks, drowning, incidents with other swimmers, falls on deck etc.....These incidents can lead to serious injury, head injuries, paralysis and death.

I knowingly and freely assume all such risks. In consideration of my participation in these activities, I hereby (on behalf of myself, my legal representatives, parents, heirs, executors, administrators, and assigns) release and forever discharge the Gwinnett County Swim League, Inc. including its officers, directors, volunteers, employees, agents etc...and the Member Teams (and their respective officers, directors, agents, employees and volunteers) from, and relinquish and forever waive, any and all claims and causes of action arising out of my participation in the league for negligence, gross negligence, and such other actionable conduct resulting in personal or bodily injury, property damage or death.

Participant Signature/Parent's signature if a minor: _____

Printed name: _____

Date ____/____/_____

Edinburgh Marlins Swim Team Volunteer Agreement
2010 Swim Season

Swimmer Name(s) and Age(s): _____

Parent Printed Names: _____

I understand that the Gwinnett County Swim League is a volunteer organization and that my participation is essential to the efficient operation of our team. I further understand that unless I am already on a committee, I am required to work **6 shifts/jobs (out of 12 possible shifts during our 6 regular swim meets)** and **1 shift/job during the Practice Meet** if my child is swimming in the practice meet. I understand that I may have to fill different positions than the ones I select during registration. I also understand if I do not select a volunteer job that I will be assigned one by the Volunteer Coordinator.

I understand that it is my responsibility to find a replacement (phone numbers for all team members will be provided at a later date), in the event that I am unable to fulfill any of these obligations. I understand that if I do not fulfill one of my obligations that my child(ren) will not be able to swim at the next scheduled meet.

I am already on the following committee: _____

I am **NOT** on a committee and I volunteer for (check at least 2 areas and put 1st or 2nd half):

Clerk of Course _____	Computer Score Table _____
Concessions (home meets) _____	Heat Ribbons (home meets) _____
Relay Stager _____	Ribbons _____
Runner (home meets) _____	Set-up (home meets) _____
Staging/Bullpen _____	Starter (home meets) _____
Stroke/Turn Judge _____	Take Down (home meets) _____
Timer _____	

Parents Signature _____

Date _____

Job Descriptions:

CLERK OF COURSE – Insures all swimmers are in correct heat and lane, answer any questions for coaches and swimmers, informs starter of combined events.

COMPUTER SCORE TABLE – Responsible for making sure scoring is accurate at home and away meets, entering times into the computer, printing score sheets and ribbon labels.

CONCESSIONS – Selling snacks and food from the concessions center.

HEAT RIBBONS - Hands heat winner ribbons to the younger swimmers

RELAY STAGER – Responsible for staging relay swimmers.

RIBBONS – Affixing labels to the back of the ribbons and having the ribbons ready for distribution the next morning after the meet.

RUNNER – Pick up completed lane sheets after each event from the timers and take to the score table.

SET-UP – Will be responsible for setting up tables, chairs, computers, etc. and making sure the pool area is ready for the meet.

STAGING/BULLPEN – Make sure swimmers are in their proper lane and heat prior to the start of each event.

STARTER – Announces events, calls swimmers to starting position and starts each heat. Volunteers for this job must be certified by attending a starter clinic.

STROKE/TURN JUDGE – Watches swimmers in assigned lanes to determine if strokes are being properly executed. Volunteers for this job **must** be certified by attending a stroke judge clinic.

TAKE DOWN – These individuals are responsible for placing the pool back in its pre-meet condition after the meet.

TIMER – Time swimmers in your assigned lane, verify names of swimmers in their lane, and record times on the lane sheets.