

**BRETON BAY SWIM TEAM 2008 SEASON  
REGISTRATION FORM**

**SWIMMER'S NAME**

**AGE**

**DATE OF BIRTH**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Address** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**PARENTAL PERMISSION  
(List all swimmers individually)**

I, \_\_\_\_\_, give permission for \_\_\_\_\_  
Parent/Guardian swimmer(s)

to swim on the Breton Bay Swim Team and attend swim meets during the 2008 season. I am aware that the Southern Maryland Swim League, the Breton Bay Swim Team, its coaches and/or Breton Bay Rec. Inc. are not responsible for injuries or accidents incurred while swimmers are participating in team activities.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

**Emergency Contact:** \_\_\_\_\_  
Name Phone