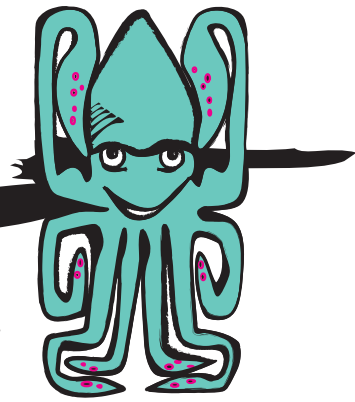


SQUID swimming queers united in denver

New Swimmer Form



Thank you for your interest in SQUID, Denver's premier and only GLBT (and friendly) Swim Team! Please fill out this form so we can understand your interests and how you heard about the team. Since we practice at facilities operated by Denver Parks & Recreation, we also require every participant to provide emergency contact information and sign the Liability statement.

CONTACT INFO

Name

Address

City

State

Zip

Phone

mobile

home

work

Phone

mobile

home

work

E-mail

Would you like to be added to our e-mail list? **All our communications are electronic*

yes

no

EMERGENCY CONTACT

Contact Name

Relation

Phone

mobile

home

work

Phone

mobile

home

work

VISITOR

Are you a visiting swimmer from another USMS and/or GLBT Swim Team?

yes

no

If yes, what team?

City, State

LIABILITY

I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all the risks inherent in Masters swimming (training and competition), including possible permanent disability or death, and agree to assume all of those risks. As a condition of my participation in the Masters Swimming Program or any activities hereto, I hereby waive any and all rights to claims for loss or damages, including all claims for loss or damages caused by the negligence, active or passive, of Colorado SQUID Swim Team, or any individuals supervising such activities.

Signature

Date

(over)

How did you hear about SQUID? (check all that apply)

- Website: USMS/COMSA Team Colorado Other _____
- SQUID Member Name _____
- Advertisement Where? _____
- Recruitment Event (ie. PRIDE, etc.) Which one? _____
- Friend
- Other _____

Please describe

I am interested in: (check all that apply)

- Competitive swimming Fitness training Triathlon training
- Open-Water swimming Spring-board diving Social events

MEMBERSHIP INFORMATION

There is a \$30 initiation/annual membership fee to join/maintain membership with SQUID Swim Team.

This allows you to log-in to the member section of our website and access all its features as well as receiving important SQUID announcements via e-mail.

PRACTICE PASSES

We have a variety of practice payment passes that will surely fit your budget. The passes (excluding the single practice fee) allow you to attend an unlimited number of practices within the specified time frame.

Pass Options	Price	Select
<i>Single Practice</i> (Drop-in Fee)	\$10.00	(default)
<i>Monthly Pass</i>	\$45	<input type="checkbox"/>
> <i>Monthly Pass</i> (*Full-Time Student)	*\$30	<input type="checkbox"/>
<i>Quarterly Pass</i> (3 Month)	\$125	<input type="checkbox"/>
> <i>Quarterly Pass</i> (*Full-Time Student)	*\$90	<input type="checkbox"/>
<i>Semi-Annual Pass</i> (6 Month)	\$250	<input type="checkbox"/>
<i>Annual Pass</i>	\$500	<input type="checkbox"/>

**A Pass becomes active on the date payment is received.*

This form should be returned to a coach or Board member at practice OR mailed to the address listed below.

Please enclose the Annual Membership Fee of \$30 (not applicable to visitors) and include, preferably, payment for the Practice Fee Pass you intend to purchase (otherwise you will be charged on a single practice basis).

Payment(s) can be submitted via PayPal through the SQUID website or make checks payable to 'SQUID Swim Team'.

Thank you and we look forward to seeing you in the pool!

SQUID Swim Team
P.O. Box 7558, Denver, CO 80207-1558

www.squidswimteam.org

