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the official swim 2002 registration form!

Step 1: What Do You Want To Do At SWIM? (Copy this page for each participant)

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		V

My Name is	7	
My Email Address is	_	
	-	Due at SWIM
My Total Board Fee which is Due at SWIM is		
□ \$0: Ages 0 to 2 □ \$10: Ages 3 to 5 □ \$30: Ages 6 to 12 □ \$55: Ages 13 to 18 □ \$120: Ages 19+		\$
My Total Registration Fee which is Due Now is	Due Now	
Before Dec 1st: ☐ \$0: Ages 0 to 2 ☐ \$40: Ages 3 to 12 ☐ \$60: Ages 13 to 18 ☐ \$80: FT Student 19+ ☐ \$110: Adult 19+		
After Dec 1st: □ \$0: Ages 0 to 2 □ \$60: Ages 3 to 12 □ \$80: Ages 13 to 18 □ \$100: FT Student 19+ □ \$130: Adult 19+	\$	
My Total Room Fee which is Due at SWIM is	-	Due at SWIM
□ \$0: Ages o to 2 □ \$70: Ages 3 & Up Sleeping On-Site □ \$40: Ages 3 & Up Sleeping Off-Site		
While I'm thinking about it, I want to be sure to get		\$
□ SWIM Mugbooks: The SWIM photo directory (\$5/each due at SWIM) I would like SWIM '02 Mugbooks		Due at SWIM
□ SWIM Long Sleeve T-shirts: I would like:XXLXLL MSXS (\$15/each due at SWIM)		
□ SWIM Short Sleeve T-shirts: I would like: XXLXL L M SXS (\$12/each due at SWIM)	ı	\$
While I'm thinking about it, I want to be sure to make		Due at SWIM
Contributions to the SWIM Scholarship Fund: I would like to contribute \$ to help others so to SWIM	_	

My Auto Insurance Company is .

Workshops & Outdoor Adventure Trips

My Driver's License Number is ___

While I'm thinking about it, \square I can help with trips! \square I can drive on trips!

Number	Workshop or Trip Name	Days	Times	lst Choice Fees
Alt	Alt	Alt	Alt	\$
Alt	Alt	Alt	Alt	\$
Alt	Alt	Alt	Alt	\$
Alt	Alt	Alt	Alt	\$
Alt	Alt	Alt	Alt	\$
Alt	Alt	Alt	Alt	\$
Alt	Alt	Alt	Alt	\$
Alt	Alt	Alt	Alt	\$
Alt	Alt	Alt	Alt	\$
Alt	Alt	Alt	Alt	\$
Alt	Alt	Alt	Alt	\$

Step 2: Fill Out the Emergency Release Form & First Aid Information (Copy this page for each participant)

Please fill out a COPY of this page for EVERY participant — Adults & Children — making copies as needed Please fill out ALL SPACES on form — If a line is not Applicable, please write in "N/A"

 $\pmb{\mathcal{E}mergency\ Release\ Form\ -}\ Make\ Copies\ for\ \mathcal{E}ach\ Participant\ -\ Please\ have\ ALL\ participants\ sign\ these\ forms\ in\ all\ places.}$ All registrants must complete this emergency release form and submit it with the completed registration.

Registrant's Name:		Date of Birth (MM/DD/Y	y):
In case of emergency notify (someone not at SWI	IM):		
Contact Name:		Contact's Phone Number	:
SWIM medical/nursing volunteers are authorize preferences. I hereby release SWIM from any lia			
Signature:	Date:	Witness:	Date:
The breaking of alcohol, drug, and other local la committed to compliance with these laws and, is under the age of 18 to possess tobacco products I have read the paragraph above and I understa	n fact, may not allow violator. and also illegal for anyone old	s to remain at SWIM. Pleas der to provide such items (se note that Florida law makes it illegal for persons
Signature:	Date:	Witness:	Date:
SWIM 2002 First Aid Information S This is for SWIM STAFF use in case of emergency. Primary Physician:			uring Registration on Dec. 26th.
Pharmacy:		Pharmacy's Phone Numb	per:
Insurance Company and Policy Number:		Insurance Company's Ph	none Number:
Diagnosis:			
Allergies:			
Medications:			
Any Other Medical Information (Attach Addition	al Sheets As Needed):		

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Step 3: Fill Out Releases For Minors (Copy this page for each participant under age 18) **Parent's Release For Children Under 18 Years of Age must be <u>signed</u>**

Parents and guardians of teens ages 13 to 17 MUST attend orientation in the Teen Dorm at 9:30PM, December 26th.

Parent's Release For Children Attending SWIM with Someone Other Than A Parent must be notarized

Parents and guardians of children ages 3 to 12 MUST attend orientation in the Craft Room at 7PM, December 26th.

the parent/legal guardian of parent/legal guardian of parent/sepal guardian of parent/sepal guardian's full name) (child's full name) a minor, hereby grant my child/minor permission to participate and attend any and all activities associated with SWIM from December 26, 2002 thr January 1, 2003. My child/minor has permission to participate in S.W.I.M. activities both on and off the camp Oualisa Bauer site, including, but not limited to the following: attendance at field trips anywhere in or outside of Miami-Dade County, Florida: participation and attendance in any and al sporting activities and games that include swimming and bicycling: participation and attendance at any and all religious or spiritual consciousness raising activities and transportation to any of said activities by any means: provided that my child/minor will be under the care and supervision of S.W.I.M. staff member while participating in said activities by any means: provided that my child/minor will be under the care and supervision of participate in said activities reparticipation in a detivities specificate in the activities activities continue past local curplew provided that my child is under the care and supervision of a S.W.I.M. staff member. When my child/minor is n participating in said activities, he/she will be under the care and supervision of either myself or his/her guardian appointed by me. In giving this permission to my child/minor to participate in the activities associated with S.W.I.M., I realize that the risk of july to my child/minor reparticipation in said activities is minimal but that risk cannot be completely eliminated, therefore, I hereby release S.W.I.M. from any liabilities asso with my child/s/minor's participation in said activities provided that such liabilities did not result from gross negligence on the part of S.W.I.M. or an its staff in the supervision of my child/minor during the course of said activities. Signature of Parent/Guardian State, Country & Date State, Country & Date State, Country	t all s s t g a s s t s s t c t c t c t t t t t t t t t
a minor, hereby grant my child/minor permission to participate and attend any and all activities associated with SWIM from December 26, 2002 thr January 1, 2003. My child/minor has permission to participate in S.W.I.M. activities both on and off the camp Owaissa Bauer site, including, but not limited to the following: attendance at field trips anywhere in or outside of Miami-Dade County, Florida; participation and attendance in any and al sporting activities and games that include swimming and bicycling; participation and attendance at any and all religious or spiritual consciousness raising activities; and transportation to any of said activities by any means; provided that my child/minor will be under the care and supervision of S.W.I.M. staff member while participating in said activities. I give my child/minor permission to participate in said activities regardless of whether s activities continue past local curfew provided that my child is under the care and supervision of a S.W.I.M. staff member. When my child/minor is n participating in said activities, he/she will be under the care and supervision of either myself or his/her guardian appointed by me. In giving this permission to my child/minor to participate in the activities associated with S.W.I.M., I realize that the risk of injury to my child/minor resulting from participation in said activities is minimal but that risk cannot be completely eliminated, therefore, I hereby release S.W.I.M. from any liabilities associated with S.W.I.M. and the supervision of my child/s/minor during the course of said activities. Signature of Parent/Guardian State, Country & Date Parent's Release For Children Attending SWIM with Someone Other Than A Parent is hereby authorized to act as guardian with full authority to act for health, medical (legal guardian's full name) care, and deeds for my child/children	t all s s t g a s s t s s t c t c t c t t t t t t t t t
a minor, hereby grant my child/minor permission to participate and attend any and all activities associated with SWIM from December 26, 2002 thr January 1, 2003. My child/minor has permission to participate in S.W.I.M. activities both on and off the camp Owaissa Bauer site, including, but not limited to the following: attendance at field trips anywhere in or outside of Miami-Dade County, Florida; participation and attendance in any and al sporting activities and games that include swimming and bicycling; participation and attendance at any and all religious or spiritual consciousness raising activities; and transportation to any of said activities by any means; provided that my child/minor will be under the care and supervision of S.W.I.M. staff member while participating in said activities. I give my child/minor permission to participate in said activities regardless of whether s activities continue past local curfew provided that my child is under the care and supervision of a S.W.I.M. staff member. When my child/minor is n participating in said activities, he/she will be under the care and supervision of either myself or his/her guardian appointed by me. In giving this permission to my child/minor to participate in the activities associated with S.W.I.M., I realize that the risk of injury to my child/minor resulting from participation in said activities is minimal but that risk cannot be completely eliminated, therefore, I hereby release S.W.I.M. from any liabilities associated with S.W.I.M. and the supervision of my child/s/minor during the course of said activities. Signature of Parent/Guardian State, Country & Date Parent's Release For Children Attending SWIM with Someone Other Than A Parent is hereby authorized to act as guardian with full authority to act for health, medical (legal guardian's full name) care, and deeds for my child/children	t all s s t g a s s t s s t c t c t c t t t t t t t t t
permission to my child/minor to participate in the activities associated with S.W.I.M., I realize that the risk of injury to my child/minor resulting from participation in said activities is minimal but that risk cannot be completely eliminated, therefore, I hereby release S.W.I.M. from any liabilities associated with my child's/minor's participation in said activities provided that such liabilities did not result from gross negligence on the part of S.W.I.M. or an its staff in the supervision of my child/minor during the course of said activities. Signature of Parent/Guardian State, Country & Date Parent's Release For Children Attending SWIM with Someone Other Than A Parent is hereby authorized to act as guardian with full authority to act for health, medical (legal guardian's full name) care, and deeds for my child/children	ociated iny of
Parent's Release For Children Attending SWIM with Someone Other Than A Parent is hereby authorized to act as guardian with full authority to act for health, medical (legal guardian's full name) care, and deeds for my child/children	ıl,
is hereby authorized to act as guardian with full authority to act for health, medical (legal guardian's full name) care, and deeds for my child/children	ıl,
From December 26, 2002, through January 1, 2003, while attending SWIM activities for said child/children. Signature of Parent/Guardian State, Country, & Date Before me, personally appeared and presented (Parent's/Legal guardian's full name) (form of ID) as identification or is personally known to me and did not take an oath, this day of , 200	002.
(month & day)	
Notary Public My Commission Expires	
(month, day & year)	
I agree to be responsible for this child/children while attending SWIM. I am aware that this means that I will be entirely responsible for this child/children in case of illness, injury, or dismissal from SWIM, and during any time when the child/children is not involved with planned SWIM activities.	38.
Signature of SWIM Guardian State, Country, & Date	
Before me, personally appeared and presented	
(Parent's/Legal guardian's full name) (form of ID)	000
as identification or is personally known to me and did not take an oath, this day of	02.
(months of way)	

the official swim 2002 registration form!

Step 4: Who's Sending in the Form? (Only one copy of this page per address)

Use separate Registration Forms for different address, but submit them together.

Serendipity Cleanup 2am+

Into Desk 9am - 12:30pm

Into Desk 4:30pm — 8pm

Into Desk 12:3opm -4:3opm

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M2 M3

A1 | A2 | A3 |

E0 E1 E2 E3 E4

M4 M5

A4 A5



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Your Name					Home Ph	one			
Address				Work Phone					
City/State/ZIP Code					Email Ad	ldress			
Are you willing to have wear	y travellers s	tay at your h	iome January	1st? Yes/	No				
Step 5: Who's Comin	a to SWIA	l togotho	~ ?						
This form has space for five	-	-		together P	lease enter eac	h nartieinan	t's subtotal	s krom Sten 1	
1		•			1		1		
Participants Names	lst SWIM? Y/N	Gender F/M	Birthday	Age	Dorm Requested	Volunteer	Food Choices	From Step 1: Due Now	From Step 1: Due at SWIM
Names	17 N	17/M			Nequesteu	Jobs (3)	Choices	Due Now	Due at SWIM
								\$	\$
								\$	\$
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								\$	\$
								1.	
								\$	\$
								Ś	\$
Dorms: (C)amping, (W)omen	(M)en (O)nii	et Coed Aduli	t (N)oisy Coed	l Adult (V)o	ung Adult (T)e	en (F)amily		Due Now	Due at SWIM
Food Choices: (V)egetarian, (i, (Notaly Coco	i Addit, (y)c	ang naan, (170)	en, (1)antity	Group	Due now	Due at SVVIVI
							Subtotal	s \$	\$
Step 6: How Are You	ı Getting T	o SWIM?	•						
On December 5th, Jerry Elser	nrath will con	npile all carp	oool into and	email carpo	oolers. Call or e	mail for last	minute nee	ds.	
Carpool? Need Off									
I plan to leave on									
I think 🗖 I can/ 🗖 I cannot	t □ I do/ □	I do not ne	ed help dri	ving. Vehicl	e	Spac	es	_	
Flying? Please expect me or	1 🗆 10am 🗖	1pm 🗖 3pm	Dec. 26th SW	IM Shuttle ((\$10) u my owi	n arrangeme	nts	Due Now	\neg
When I leave SWIM, please e									
Arrive Airline	H	Flight #	_ Depart	Airline _		Flight #		\$	
0.1			M: : IIII 01			(40 1 1 4			=
Early, on December 25th? Request Home Hospitalit.								Due Now	
Do you have any special Hor	-		rerson) \square O_0	per nome no	spiiailly since	i iive in miai	ııı	\$	
be you have any special nor	ne mospituiti,	necus						·	
								Total	Total
								Due Now	Due at SWIM
								\$	\$
								<u>'</u>	т
Volunteer Job Codes	:			Step 7:	Checklist I	Before Mo	iiling		
Use these codes to indicate t	volunteer pre <u>l</u>	terences in S	tep 5 above.	☐ I've țili	led out every sp	ace on this p	oage and ac	lded up all totals.	
Every adult works 3 volunt	teer jobs to he	lp keep fees	low.		closed a check	•			
Volunteer Jobs & Times	Thu Fri S				erson above ho	•			
Breakţast 7am — 10am	2	B2 B3 B4	B5		cluded a Signe c		•	L minors Attending SWIM V	Ni+h
Lunch 11:30am — 2:30pm	Teens	L2 L3	L ₅					i Attenaing swim v not attending with	
Dinner 4:30pm — 7:30pm	Do	D2 D3 D4	D ₅		cluded an Emer	-		=	
Serendipity 8pm - 11pm	+ + +	S2 S3 S4	\$5	_	ed separate for			· ·	
Serendipity 11pm – 2am	Xo X1 2	$\chi_2 \mid \chi_3 \mid \chi_4$	<i>X</i> ₅	☐ For Pri	ority Mail/Fed8	cx, I've signed	the "waive	er of signtature"	

SWIM c/o Michael Conlen, Registrar 4532 W. Kennedy Blvd #257, Tampa, FL 33602-2042

 \square I'm mailing these forms so they will arrive before Dec. 20th

Mail Registration Forms, with check payable to SWIM, to...