



2019_20 Season Registration

Parent/Guardian Last Name _____ First Name _____

Parent/Guardian Last Name _____ First Name _____

Primary Phone _____ Alternate Phone _____

Email _____

Address _____

Athlete Info

Athlete Last Name _____ First Name _____

Birthdate _____ Age _____ T-Shirt Size _____

Are you currently registered with a USA swim club? _____ Which one? _____

Athlete Last Name _____ First Name _____

Birthdate _____ Age _____ T-Shirt Size _____

Are you currently registered with a USA swim club? _____ Which one? _____

I agree to keep my account current, abide by all policies contained in the handbook and on the website at <http://www.clubtridentaquatics.com> and understand that my membership continues until I provide 30 days written notice on the official termination form by the set due date or my program ends. Further, I understand Club Trident Aquatics assumes no responsibility for prorating based on the athletes and families schedules nor cancellation due to weather, pool malfunction or scheduling conflict with Cy Fair ISD.

Parent Signature _____ Date _____

I grant to Club Trident Aquatics, the right to use my athletes name(s), likeness, and image, in print, video or electronic media form in promotional materials or any account or record of my participation in activities sponsored or promoted by Club Trident Aquatics

Parent Signature _____ Date _____

Office Use Only: Programs Enrolled