



Club Trident Aquatics Swim Club

Try-Out Form **Please Write Neatly**

Today's date:	Swam Summer League? Y or N: Team Name/ # of Yrs.	USA Swimmer? Yes or No / Club Name:
Child's Name:		Current Age / Birth Date :
Grade /Name of School:		Do you plan to attend Monthly Swim Meets?: Yes or No How many practices can you attend a week? _____ Do you plan to swim entire season Sept-July? Yes or No
Mother/Father's Occupation or Hobby		

Mother's Name:	Father's Name:
Address:	Address:
Phone: Best/Alt	Phone: Best/Alt
E-mail:	E-mail:

Coaches comments	Legal		Competency/Comments		
	Yes	No	Good	Fair	Poor
Freestyle 25 or 50 Flip					
Backstroke					
Breaststroke					
Butterfly 100 IM w/+turns					

Recommended Group:	Pre-Team / Stroke or Lessons:
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Coach:	Date:
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"Hold Harmless Agreement" – I (we), further acknowledge and in consideration for being permitted to participate in activities with and obtaining services from Club Trident Aquatics, Cy Fair ISD(hereafter collectively referred to as "The Swim Clubs") hereby release, acquit, and waive any claim for liability against The Swim Clubs, their directors, officers, employees, agents from any and all claims on account of illness or personal injuries sustained or suffered by the undersigned(s) arising from participation in or obtaining service from The Swim Clubs, including any event, travel, practice, or any other activities related to or involving The Swim Clubs.

I have carefully read the above liability release and sign it with full knowledge of its contents and significance.

Parent/Guardian

Date

Swimmers are placed in a swim group and/or moved from one group to another based on individual evaluation by the coaches only and not due to parents' recommendation or convenience. The coach's decision is final.