

Team Genesis/LOVE Swimming

A Sports Ministry of Trinity Fellowship Church

"Free" Community Outreach Swim Clinic Registration Sign-Up Form

LOVE Swimming "Free" Community Technique Swim Clinics develop good stroke and kicking swimming skills.
2009-2010 Annual Swim Season (September 2009 thru August 2010)

Date Received: _____

By: _____

Swim Clinic Swimmer Information:

Name: _____

Sign-up Date: _____ Age: ____ Grade in School/College: _____ DOB: _____ Gender: _____

Team: _____ Training Group: _____ T-Shirt: Youth (s - xl) ____ Adult (xxs - 3x) ____

Parent Information: **Mother:** _____ **Father:** _____

Home Phone: _____ Home Phone: _____

Work Phone: _____ Work Phone: _____

Cell Phone: _____ Cell Phone: _____

Employer: _____ Employer: _____

Mailing Address:

Street: _____ City: _____ State: _____

Donation: Make Checks Payable to **Trinity Fellowship** & mail to:

Donations are not required but always appreciated.

Trinity Fellowship

P.O. Box 184

Bonne Terre, Missouri 63628

Attn: Free Swim Clinics Director

DONATIONS (not required for Free Clinic) if desired: Billing address if different from Mailing Address.

Street: _____

City: _____ State: _____

Phone: _____ Cell: _____ Email: _____

Credit/Debit Card: _____ Discover, Visa, Master Card) Exp (Month/Year): _____

Name of Card: _____ Total \$ to Charge Debit/Credit: _____

All "Free" Community Swim Clinics will be conducted at Webster University,
470 East Lockwood, St. Louis, MO. Swimmers are not required to know how to swim.

Please place a check mark in the box of the Free Community Swim Clinic you want to attend:

Sunday, September 27, 2009 "Free" Community Swim Clinic	Sunday, January 31, 2010 "Free" Community Swim Clinic	Sunday, May 9, 2010 "Free" Community Swim Clinic
Sunday, October 18, 2009 "Free" Community Swim Clinic	Sunday, February 21, 2010 "Free" Community Swim Clinic	Sunday, June 6, 2010 "Free" Community Swim Clinic
Sunday, November 29, 2009 "Free" Community Swim Clinic	Saturday, March 27, 2010 "Free" Community Swim Clinic	Sunday, July 11, 2010 "Free" Community Swim Clinic
Sunday, December 27, 2009 "Free" Community Swim Clinic	Sunday, April 25, 2010 "Free" Community Swim Clinic	Sunday, August 8, 2010 "Free" Community Swim Clinic

All "Free" Community Swim Clinics held on **Saturdays & Sundays** are from **1:30pm-2:30pm.**

Waiver: As the legal parent/guardian of a participant in LOVE Swimming Swim Camp(s)/Clinic(s), as represented by this registration, I agree not to sue and also I agree to hold "LOVE Swimming, Team Genesis, Trinity Fellowship and it's officers and it's agents free and harmless from any claim or expense that may arise due to participation in this program.

Swimmers Signature (parent/guardian if swimmer is under 18 years)

Swimmers Name & Training Group

8144 Terre Bleue Drive * P.O. Box 184 * Bonne Terre, Missouri 63628

Office/Fax: 573-358-7727 * Cell: 573-366-0410

Email chico@i1.net * Web Address: www.loveswimming.org

"Love one another. As I have loved you, so you must love one another." John 13:34