



# SUMMER SWIM TEAM

**June 21 – August 13**  
**Cost \$450 or \$65/week (2 week minimum)**

**Checks payable to Pacific Swim Team**  
14343 Silverset Street | Poway, CA | 92064

**RANCHO ARBOLITOS**

14343 Silverset Street | Poway | 92064

**Beginner Novice:** Mon - Thurs | 10:00-10:30am

**Advanced Novice:** Mon – Thurs | 9:00-10:00am

**WESTVIEW HIGH SCHOOL** (12 & Over Only)\*

13500 Camino Del Sur | San Diego | 92129

**Advanced Novice:** Mon-Thurs | 5:30-6:30pm

\*Time subject to change

**FIT ATHLETIC**

12171 World Trade Dr. | San Diego | 92128

**Beginner Novice:** Mon-Thurs | 3:00-3:30pm

**Advanced Novice:** Mon – Thurs | 3:00-4:00pm

**4S RANCH\***

16118 4S Ranch Parkway | San Diego | 92127

**Beginner Novice:** Mon-Thurs | 10:00-10:30am

**Advanced Novice:** Mon-Thurs | 9:00-10:00am

\*please register & pay at 4S location

Participant Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Age \_\_\_\_\_

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Participant Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Age \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Contact Number: \_\_\_\_\_ Email: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

I, the understand hereby give consent for my child(ren) to participate in all events conducted by Pacific Swim Team. I agree not to hold any employee/representative or owner of Pacific Swim Team liable for any type of personal injury, loss of life or damage to property sustained by me or my child(ren) as a result of participation. I acknowledge that I am aware that there are risks to me of exposure to directly or indirectly arising out of, contributed to, by, or resulting from an outbreak any and all communicable disease, including but not limited to, the virus “severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)”, which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof; In consideration of having the opportunity to participate as either a team member or competitor at location, and in acknowledging that I am aware of and willing to assume the risks associated with this activity, I hereby voluntarily agree to waive, hold harmless and indemnify Pacific Swim and its trustees, agents, volunteers and employees from any and all claims, demands, damages and causes of action of any nature whatsoever, which I, my heirs, my assigns or successors may have against them for, on account of, or by reason of my participation in the above activities. If the contact cannot be reached in an emergency, I authorize any coach or representative of the Club to obtain emergency care. If a parent cannot be contacted in the event of an emergency, I authorize any coach or representative to obtain emergency care as needed.

Parent/Guardian Name: \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_ Dated: \_\_\_\_\_

**NO REFUNDS**