

Walnut Creek Spring Clinic Application																			
Please fill out completely. Make your check payable to Brad Hoy and mail to Brad Hoy 3437 Withersed Lane, Walnut Creek, CA 94598																			
When: Beginning March 9–26						Coaches: Brad Hoy, Tim Freeman, Sam Dix													
Where: Woodland Swim Club in Walnut Creek																			
Times: 3:45–4:30 (group 1), 4:30–5:15 (group 2)						Fee Structure													
Days: Mon, Tues., Wed., Thurs.						Cost: \$165 per swimmer													
Last Name		First Name		Middle Name		Swimmers age:				Gender									
Address:						City:				Zip code:									
Mother:				Phone:		Father:				Phone:									
Primary email:						Other email:													
<p>In consideration of participation in the Walnut Creek Spring program, we, the parents/ guardians of the above swimmer, hold the coaches and employees free and harmless from any liability for injuries or damages they, or our swimmers, may incur as a result of our swimmer's participation in team activities, including practice sessions, and we assume the team's responsibility for the same.</p> <p>In case of emergency, we understand every attempt will be made to reach our family physician. If he/she is not available, we give our permission to use the closest medical facility. We also authorize the appropriate team representative to approve medical or dental treatment for our child in our absence.</p>						Emergency contacts if parents can't be reached:													
						Name/phone:													
						Name/phone:													
						Physician/phone:													
						Dentist/phone:													
						Medical insurance co.:													
						Policy number:													
						Phone:													
Parent/Guardian signature:						Special medical information (allergies, etc):													
														Date:					