

**Bentwater Barracudas**  
800 Bentwater Drive  
Montgomery, TX 77356  
REGISTRATION FORM 2019 (one per child)

Name of Swimmer: \_\_\_\_\_

Member Number: \_\_\_\_\_

Age: \_\_\_\_\_ Years Swimming \_\_\_\_\_ Shirt Size \_\_\_\_\_

Parent's names: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Registration Fees - Includes the cost of registration, team shirt, all practices & meets, and the end of season banquet (for the participant only)

Swim Team \$ 185  
T-shirt size \_\_\_\_\_

Please list any Special Needs: \_\_\_\_\_

**Cancellations and Refunds:** Refunds will only be given if injury or special circumstances occur during the course of the season.

**PAYMENT METHOD**

**Member Charge or Credit Card**

(Please check appropriate box)  VISA  MasterCard  Amex  Member number # \_\_\_\_\_

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Print Cardholder Name: \_\_\_\_\_

**Please mail or fax completed registration form with payment to: Bentwater Sports Club**  
**Attn: Kris Reinlie**  
**800 Bentwater Drive**  
**Montgomery, TX 77356**  
**Fax #: 936-597-5575**

**Contact:**  
**Head Swim Coach – Lindsay Manning 281-309-6406**

**Fitness Director – Kris Reinlie 936-597-2260**

**Email:** [lnm@manning93.com](mailto:lnm@manning93.com) or [kreinlie@bentwaterclub.com](mailto:kreinlie@bentwaterclub.com)

*Do not email credit card information because security cannot be guaranteed. You may fax or telephone credit card information.*

*By signing this document, I acknowledge that I have voluntarily chosen to allow my child to participate in Bentwater's swimming program. In signing this document, I acknowledge being informed of the physical nature of swimming programs and there is always potential for, but not limited to, abnormal blood pressure, shortness of breath, fainting, or even death. I acknowledge further that I am choosing to allow my child to participate in the program assuming they are in good health and ready for physical activity. I understand that the program is completely voluntary. I accept all responsibility for the health of my child or any resultant injury or mishap that may affect the well being of my child, and with respect to any injuries and damages related to the program. I am freely and voluntarily executing this informed consent and acknowledge that I have read this form and agree for my child to participate in the Bentwater Barracuda's swim program.*

Signature \_\_\_\_\_

Date \_\_\_\_\_