



X-Cel Swimming  
P.O Box 3141  
Princeton, NJ 08543

<https://swimxcel.org>

# X-Cel Swimming -Registration Form

(2 pages total) [headcoach@swimxcel.org](mailto:headcoach@swimxcel.org)

## PLEASE TYPE & COMPLETE ALL SECTIONS

(E-mails & the Team Website are the primary sources of team information and communication)

General Information			
Check One:	<input type="checkbox"/> Short Course	<input type="checkbox"/> Long Course	<input type="checkbox"/> Stoke & Turn Starting _____(ex:Aug2024)
		<input type="checkbox"/> Swim America	
Returning Swimmer: <input type="checkbox"/>	Is information below different from last year? Yes <input type="checkbox"/> No <input type="checkbox"/>		
New Swimmer: <input type="checkbox"/>	Attach all swim times &, if applicable, USA swim number and a completed USA transfer form.		
Swimmer Last name		First name	Middle initial
Male <input type="checkbox"/> Female <input type="checkbox"/>		DOB: mm/dd/yyyy	
Street Address		City	State Zip code
Father's Name		Mother's Name	Guardian's name(s)
E-mail address (this will be used as the primary means of communication)			
Home Phone #	Day Time #	Mother Cell #	Father Cell #
Short Course and Long Course families must participate in one committee during the season. Check one: <input type="checkbox"/> Swim Meet Committee <input type="checkbox"/> Fundraising Committee <input type="checkbox"/> Website Committee <input type="checkbox"/> Publicity Committee <input type="checkbox"/> Operations Committee <input type="checkbox"/> Social Media Committee <input type="checkbox"/> Timing Assignments Subcommittee <input type="checkbox"/> Photography Committee <input type="checkbox"/> Swim Official Committee <input type="checkbox"/> Apparel and Equipment Committee			
<b>Medical Information – It is the parent's responsibility to discuss medical information with their child's coach. In the event of an emergency this information would be provided to emergency personnel.</b>			
Emergency Contact Name and Phone #			
Doctor Name and Phone #		Last physical within past 2 years?: Yes <input type="checkbox"/> No <input type="checkbox"/> Date:	
Is swimmer allergic to any medication, food, insects, or any other allergies? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, describe & list allergies:			
Does swimmer take any prescribed medication on a permanent or semi-permanent basis? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, describe & list all medication:			
Does swimmer have asthma or any other respiratory disease? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, describe:			
Does swimmer have epilepsy? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, describe:			
Does swimmer wear any type of removable appliance such as contacts, retainer, etc. while swimming? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, describe:			
Does swimmer have any other disease or condition that the coaching staff should aware of? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, describe:			
Please list any other injury or surgery that the coaches should be aware of:			

Print completed form (2 pages), sign and submit with payment. Send all questions to: [headcoach@swimxcel.org](mailto:headcoach@swimxcel.org)

For Official Use Only	Date:	Rc'd by:	Level placement:
Check #:	\$ Amount:	\$ Amount Due 2 <sup>nd</sup> payment:	

## Registration Form Release of Liability

Each of the undersigned parent and swimmer certify that swimmer is in good health, and capable of participating in all X-Cel Swimming activities and practices. Parent and swimmer each agree to abide by all rules of X-Cel Swimming, our host swimming pools, New Jersey Swimming and USA Swimming.

Parent understands that registration with X-Cel Swimming represents a financial commitment through the end of the season. Fee adjustments may be made only under exceptional circumstances. Upon receipt of a written request for an adjustment from this commitment, the X-Cel Board of Trustees may grant or deny such request in its sole judgment and discretion. Parent also understands that the required non-refundable deposit must accompany the signed copy of this registration form. Parent voluntarily and without compensation authorizes X-Cel Swimming to have promotional photographs of each of the undersigned swimmers made, displayed, and provided to others of its choosing for display, during the course of swimmer(s)'s participation on the X-Cel Swimming team. Parent hereby releases, indemnifies and holds harmless X-Cel Swimming and each of its Trustees, officers, members, coaches, personnel, volunteers, and agents (together, the "X-Cel Parties") from any liability in connection with X-Cel's use of the photographs of swimmer(s) as set forth above.

Each of the undersigned swimmer(s) and parent understands, acknowledges and agrees that swimming is an inherently dangerous activity, and that accidents resulting in serious bodily injury and even death can occur. The undersigned swimmer(s) and parent, in understanding, acknowledging and agreeing that such risks exist, hereby knowingly and voluntarily assume all such risks and release the X-Cel Parties from any and all liability arising therefrom. In consideration of being permitted to participate in the X-Cel Swimming team and its programs, the undersigned swimmer(s) and parent hereby agree to release and hold harmless each of the X-Cel Parties from any and all claims or liability for any loss, injury or direct or consequential damages suffered by the undersigned swimmer(s) or parent arising out of any act or omission by any X-Cel Party in connection with any programs and activities conducted by, sponsored by, or participated in by X-Cel Swimming. In the event that any provision contained in this Release of Liability is held to be invalid, inapplicable or unenforceable, this Release of Liability shall be interpreted so as to confer the maximum amount of immunity to each of the X-Cel Parties, as is permissible under applicable law.

## Responsibility & Participation Section

X-Cel Swimming depends on our parents to run our swimming team, and there are a number of duties and responsibilities that must be fulfilled. None of them are difficult, and they don't have to cost you anything – what we need is your time and participation. The benefits to all X-Cel members are not only a cost-effectively run team, but the satisfaction of contributing to our children's development as competitive swimmers.

We expect our swimmers to behave in a sportsman-like manner, to respect all coaches, personnel, other swimmers, and swim meet officials. All swimmers must comply with rules of conduct established by our team, our host swimming pools, New Jersey Swimming and USA Swimming, including to respect the property of others.

All parents and swimmers must fulfill the duties and responsibilities outlined below. To remain in good standing as members and swimmers with X-Cel Swimming, your family must be current with payment of all fees and deposits, and your swimmers must be in compliance with all rules of conduct. Any member who has not fully satisfied their financial obligations to the team will be barred from all X-Cel swim practices and meets until those obligations are fully satisfied. Any swimmer in violation of the rules of conduct will be penalized as appropriate, including being barred from swimming, and parents may be fined in addition to paying any liability incurred by the team.

Parents/Members:

- Perform the tasks (eg, timing assignments) assigned to you at any swim meet in which your child competes, or arrange for a substitute.
- Participate at all meets hosted by X-Cel – even if your child is not swimming, e.g. sales and fundraising, timing, announcing, etc.
- If a Meet Ad Book is needed, ad solicitation is required – minimum of \$100 in ads per family.
- Participate in additional administrative, management, or fundraising activities as needed.

If you fail to perform an assigned task, then a penalty will be imposed for each lapse: \$50 first time; \$100 second time; \$250 third time; \$500 for each additional time. The penalties will be deducted from either your met escrow account; family work bond or be added to your account balance.

Swimmers:

- ALL swimmers are expected to compete.
- ALL swimmers are expected to be sportsman-like and respectful to others and to all facilities used.

**I have read the foregoing and agree to fulfill all of my duties and responsibilities as an X-Cel member. I also pledge that my swimmer(s) will fulfill their duties and responsibilities to the team.**

## Parent and Swimmer must sign and date

**By signing below, I hereby represent and warrant that I have fully and truthfully completed this Registration Form and that I have read and agree to all of the above. In addition, I authorize the X-Cel Parties to act in my place concerning emergency medical procedures involving my child and agree that the indemnity provisions set forth above shall govern.**

Swimmer Signature	Date	Parent Signature	Date