



**SWIM TEAM  
Try-It-Out Application**

Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Swimmer's Last Name:** \_\_\_\_\_ **First:** \_\_\_\_\_ **MI:** \_\_\_\_\_

**Birthdate:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Gender:** M / F **Age:** \_\_\_\_ **Home Phone:** \_\_\_\_\_

**Primary email address:** \_\_\_\_\_

Mother's name: \_\_\_\_\_ Father's name: \_\_\_\_\_

Mother's cell phone number \_\_\_\_\_ Father's cell phone number \_\_\_\_\_

Mother's email address \_\_\_\_\_ Father's email address \_\_\_\_\_

Home Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School \_\_\_\_\_ Grade: \_\_\_\_\_

Ethnicity? (Optional) \_\_\_\_\_ Disability: YES: \_\_\_ NO: \_\_\_ If yes, in what way? \_\_\_\_\_

List any physical restrictions/Allergies: \_\_\_\_\_

Which Learn-To-Swim program did your child attend (if any)?: \_\_\_\_\_

Any previous Competitive Swimming Experience?: Yes: \_\_\_\_\_ No: \_\_\_\_\_ How many years?: \_\_\_\_\_

If YES, and on Summer Club Team, please indicate name of team here: \_\_\_\_\_

If YES, and on a USA Swim club or YMCA club, please indicate name of team here: \_\_\_\_\_

Date last represented that team: \_\_\_\_/\_\_\_\_/\_\_\_\_

How did you hear about ZEUS?: \_\_\_\_\_

**ABOUT ZEUS AND PARENT PARTICIPATION**

We are non-profit, parent run organization that relies on parent volunteers to ensure the continued success of our program. In fact, it is one of the things that makes our team feel more like a family. Everyone helps out! So, in addition to satisfying all fee requirements, parents will be required volunteer at ZEUS Team events, such as helping out at swim meets. There are many fun and easy ways to contribute and we look forward to having you join us!

**RELEASE**

The undersigned here by agree to assume responsibility and hold the **NORWALK AQUATIC CLUB (NAC)** its agents, representatives, servants and employees, harmless from and against any and all liabilities, losses, damages, claims and injuries to persons or property resulting from, arising out of, related to or connected with my participation in the **ZEUS SWIM TEAM** program sponsored by the **NAC**. I hereby, for myself, my heirs and assigns, do forever discharge the **NAC**, it's representatives, officers, agents, and employees, from all claims, damages and causes of action which I may have or may hereafter have, arising out of, related to, or in any manner connected with injuries or damages I may sustain by reason of my participation in the above described program.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

**75 Main Avenue, # 272, Norwalk, CT 06851**  
**203-838-5836** [www.zeusswimteam.org](http://www.zeusswimteam.org)