



2018 One Event Registration Form

Register with the same name you will use for competition. **Please print clearly.**

Last Name		First Name		MI
Street Address				
City/State/Zip			Phone	
Date of Birth (mm/dd/yy)	Age	Sex (circle) M F		E-mail address
Event Name and Location				
Signature (required)			Today's Date (required)	

Instructions:

1. Fill out both pages of this form. Page 1 is the application; Page 2 is the participant waiver. **Both pages** must be signed and dated by the participant.
2. Make check payable to: **PAY Parents Aquatic Club**
3. Fees: USMS \$ **15.00** Total
4. Meet Director should retain one copy of the signed forms for his state's applicable personal injury statute of limitations time period
5. Meet Director should mail check and completed forms (both Pages 1 and 2) to:
Janet Jastremski, Registrar
Delaware Valley LMSC
717 Willow Street, Apt. 2A
Lansdale, PA 19446

NOTE: Times swum under the one-event registration are not eligible for USMS Top 10 or records consideration.