



2008 Lindbergh Swim Camp

Instruction in stroke mechanics, starts, and finishes.

Athletes Name _____

Age (fall '08) _____ Grade (fall '08) _____

Address _____ Zip _____

Home Phone () _____ Cell # () _____

Shirt Size (Circe One) YS YM YL AS AM AL AXL A2XL

Waiver

I hereby give my consent for _____ to attend the Lindbergh Swim Camp. I will not hold the school, the coaches or the camp instructors responsible in the event of an accident or injury. I give my consent for the camp instructors to obtain medical care they deem necessary. I hereby release all Lindbergh School District employee's or camp instructors from all claims resulting from my child's participation in this event.

Emergency Contact () _____

Name of Contact _____

Name of Insurance Company _____

Doctor's Name _____ Dr. Phone () _____

Parent /Guardian Signature _____ Date _____

Campers will receive swim caps and a camp t-shirt
Registration Information: Fee \$40 (\$35 per athlete if 2 or more per family)

**Checks payable to: Lindbergh Aquatics Boosters .
Registration must be received by July 21st to get a shirt.**

Mail to: Eric Means
Lindbergh High School
4900 S. Lindbergh Blvd.
St. Louis MO 63126

Questions? Email: emeans@Lindberghschools.ws

Meet at the LHS pool dressed in a suit/trunks, with goggles and a towel.
Bring a water bottle please.