

**2009 REGISTRATION FORM  
STANFORD FEMALE SUMMER WATER POLO**



**ATHLETE INFORMATION**

1. \_\_\_\_\_  
Player's Name Birthdate Age School Grade in 08-09

\_\_\_\_\_  
Player's email (if applicable- put family email below) Allergies

USWP # and expiration date \_\_\_\_\_ *Be sure you are registered as a member of Stanford Water Polo Foundation, Club # 570*

2. \_\_\_\_\_  
Player's Name Birthdate Age School Grade in 08-09

\_\_\_\_\_  
Player's email (if applicable) Allergies

USWP # and expiration date \_\_\_\_\_

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**FAMILY INFORMATION**

\_\_\_\_\_  
Parent(s) Name Phone # Emergency Phone #

\_\_\_\_\_  
Family Address City Zip

\_\_\_\_\_  
Family Email

The undersigned, in accepting the right to participate in the Stanford Water Polo Summer Program and activities, waives all rights and claims for injuries or damages for negligence or otherwise, against Stanford University, Stanford Women's Water Polo Endowment Fund, Tanner Water Polo Corporation, Menlo School, Sacred Heart Academy, Palo Alto School District, their agents, servants, directors and employees by reason of participation in these activities and programs of the Stanford Female Water Polo Summer Program.

\_\_\_\_\_  
Participant's Signature Date Parent/Guardian's Signature Date

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**Please make your check payable to: TWPC (Tanner Water Polo Corporation)**

See registration form to figure out cost (reduce amount \$40 for additional sisters)

(for players who make the Senior and Elite teams we will collect the difference in payment when the team is named.)

**Please mail this registration form and your full payment to: Tanner Water Polo Corp.  
PO Box 19620  
Stanford, CA 94309**