

**PROVINCETOWN SWIM FOR LIFE & PADDLER FLOTILLA  
OFFICIAL REGISTRATION FORM  
(DUE SEPTEMBER 9, 2017)**

Provincetown Harbor Swim for Life & Paddler Flotilla; PO Box 819, Provincetown, MA 02657  
Saturday, September 9, 2017 (508) 487-1930 [thecompact@comcast.net](mailto:thecompact@comcast.net)

<b>STAFF USE ONLY</b> Swimmer #:
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Name \_\_\_\_\_ Age \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

City/State/Zip \_\_\_\_\_ (Circle One) Swimmer, Paddler, Safety Boater

<b>STAFF USE ONLY</b> Pledge Total:
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**Please enter me in the Provincetown Harbor Swim for Life & Paddler Flotilla to be held on Saturday September 9, 2017**

I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all risks inherent in ocean kayaking & Masters Swimming ( training & competition), including possible disability or death, and agree to assume all those risks. I hereby disclaim any or all rights to claim for loss or damages arising out of my participation in the Provincetown Harbor Swim for Life & Paddler Flotilla or any activities incident thereto against the Provincetown Community Compact, Inc. (Swim for Life), the United States Masters Swimming, Inc. the Local Masters Swimming Community, the Town of Provincetown, the clubs, host facilities, meet sponsors, meet committee, or any individuals officiating at the meets or supervising such activities, as a condition of my participation in Masters Swimming & the Swim for Life & Paddler Flotilla. In addition, I specifically acknowledge that I am aware of all risks inherent in open water swimming and agree to assume all of those risks.

I further attest and certify that I have read and understood the above waiver and assumption of risk, that I am making this waiver and assuming all such risks voluntarily, and that all information and the signatures contained herein are accurate and genuine.

Date \_\_\_\_\_ Signature \_\_\_\_\_

**IMPORTANT: IF YOU ARE 15-18 YEARS OF AGE,** you must have the express permission of both your parents or your legal guardian to participate in this event.

I understand the conditions of entry and hereby grant my permission for (name of swimmer) to participate in the Provincetown Swim for Life.

Date \_\_\_\_\_ Signature of parents or legal guardian \_\_\_\_\_

**FRIENDS OF THE SWIM**

I am unable to swim or paddle this year, but wish to support the celebration.

\_\_\_\$100 \_\_\_\$50 \_\_\_\$25 \_\_\_\$10 \_\_\_Other

Prayer Ribbons—People to Honor

Name \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

City/State/Zip \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

\_\_\_\_\_

2017 Swim t-Shirts: \$20 each \_\_\_Medium \_\_\_Large \_\_\_XL

Please make checks payable to "Swim for Life"