$\frac{2007\ STANFORD\ \textbf{GIRLS}\ WATER\ POLO\ MICRO\ FALL\ LEAGUE}{REGISTRATION\ FORM}$



ATHLETE (S) INFORMATION

Stanford, CA 94309

I. Player's Name		Birthdate		Schoo	.1	Grade in 07-08
riayer sivanie		Diffillate	Age	SCHOO	<i>)</i> 1	Graue III U/-U8
USWP # and expiration date	Known Allergie	es				
2						
Player's Name		Birthdate	Age	Schoo	ol	Grade in 07-08
USWP # and expiration date	Known Allergie	es .				
PARENT INFORMATION		(s) Name(s)				_
Phone #	Emergency #		Parent/Family Email			
Family Address		City			Zip	
Please check which league of location TBD.	lays your child will	attend: All Le	ague gam	es are so	cheduled to be	held from 9-11 a
Athlete Name	Sat, Sept 22	Sat, Oct 6	Sat, Oc	t 20	Sat, Oct 27	
The undersigned, in accepting the reforming in accepting for injuries or damages for neglige. Water Polo Corporation, NCWPC, directors and employees by reason	nce or otherwise, agains Menlo College, Menlo	t Stanford Universi School, Fremont H	ty, Stanford ills Country	Women's Club, Sac	s Water Polo End cred Heart Prep, t	owment Fund, Tanne heir agents, servants
	Parent/Guardia	n's Signature		Date	-	
Please make your check pay	able to: TWPC		ration Fee		r)	
Return to: Tanner Wate	er Polo Corporation	l				