



## TCDSSI 2026 – SWIMMER REGISTRATION

<b>School</b>	
<b>Surname</b>	
<b>First Name</b>	
<b>Date of Birth (DD/MM/YYYY)</b>	
<b>Gender</b>	
<b>Emergency Contact &amp; Phone Number</b>  ** Must be in possession of Ontario Health Card **	

In accepting my child's registration for the 2026 TCDSB Swim Invitational, I hereby give the TCDSB and its volunteers authority to act on my behalf, if I am not present in the case of an emergency. I hereby release the TCDSB and the Etobicoke Olympium Pool and their staff and volunteers from all actions, claims, demands and damages arising from any accidents or injury which are caused by or arise from participation in the 2026 TCDSB Swim Meet.

I give my consent to the TCDSB to use the following information for promotion of TCDSB students, staff, programs, schools or the Board as a whole, through TCDSB publications (including brochures and advertising), Board and school newsletters, the Board's website and the outside (print or electronic) media.

- My child's photograph/image/video footage of my child
- My Child's Age
- The Name of my Child's school
- My Child's Name
- My Child's Grade level

PARENT OR GUARDIAN'S NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_