

## **<u>2025 Pacific Swimming</u> <u>Zone All-Star Meet, May 17th-18th in Sunnyvale, California</u>**

## 8/U All-Star Athlete Release Form (one form for each 8/U athlete)

My athlete			been selected to represent
	(Athlete's	name & age)	
Zone(Name of	at the Zone All-Star Meet in Sunnyvale, California on May 18, 2025.		
my athlete at all ti he/she is swimmin	mes, except for g at the meet on	when he/she is participating in the Satu	understand that I am responsible for arent) urday afternoon practice in Sunnyvale, while pating in the team dinner. During these times agers.
participating in th	e Saturday war		o and from the meet, and if my athlete is at Fremont Marriott Hotel (46100 Landing te to and from these team events.
I understand that I he/she is attending			for my own and my athlete's lodging while
I will have my a Sunnyvale) on Su			l Pool, 1283 Sunnyvale-Saratoga Road,
been checked in. Pacific Swimming the Head Manager meals, and after the	I cannot check it is only response. I will <b>CHECH</b> the meet is over a ming pay for my	n my athlete with a coach or any of the ible for my athlete or any incidentals various of the total or my athlete with the Head Manaon Sunday. Pacific Swimming will no	not leave my athlete alone before he/she has a assistant team managers. I understand that when he/she has been signed in properly with ager after Saturday's practice ends, after team of reimburse me any of my lodging cost, nor om the meet. I am responsible for all of my
(Parent/Guardian's signature)		re)	(Date/Time)
		In/Check Out with Head Manager	Manager (parents to sign and at all times):
Saturday, May 1'	7th Practice:	Checked in:(Parent signature/date/time)	Checked out:(Parent signature/date/time)
Saturday. May 17	th Dinner:	Checked in:(Parent signature/date/time)	_ Checked out:(Parent signature/date/time)
Sunday, May 18tl	h Meet:	Checked in: (Parent signature/date/time)	Checked out:(Parent signature/date/time)