

***Email Application To:***

*Jon Cabel  
Age Group Vice-Chair  
Illinois Swimming*

procamp@ilswim.org

**Due: 4/22 by 12:00pm**

**INTENT TO ATTEND**

**2019 ILLINOIS SWIMMING 11-12 PRO-SERIES CAMP**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ATHLETE NAME: | |  | | | | | | | | | | | | | | | | | | |
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| ATHLETE’S USA SWIMMING ID: | | | | | |  | | | | | | | | | | | | | | |
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| ATHLETE’S LEGAL NAME FOR TRAVEL: | | | | | |  | | | | | | | | | | | | | | |
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| **PARENT INFORMATION** | | | | | | | | | | | | | | | | | | | | |
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| MOTHER’S NAME: | |  | | | | | | | | | | | | | | | | | | |
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| FATHER’S NAME: | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| MOTHER’S EMAIL: | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| FATHER’S EMAIL: | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| MOTHER’S PRIMARY PHONE CONTACT NUMBER: | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| DAY: **(Check one)** | | CELL | |  | | |  | | WORK | | |  | |  | | HOME | |  | |  |
|  | | | | | | | | | | | | | | | | | | | | |
| EVENING: **(Check one)** | | CELL | |  | | |  | | WORK | | |  | |  | | HOME | |  | |  |
|  | | | | | | | | | | | | | | | | | | | | |
| FATHER’S PRIMARY PHONE CONTACT NUMBER: | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| DAY: (Check one) | | CELL | |  | | |  | | WORK | | |  | |  | | HOME | |  | |  |
|  | | | | | | | | | | | | | | | | | | | | |
| EVENING: (Check one) | | CELL | |  | | |  | | WORK | | |  | |  | | HOME | |  | |  |
|  | | | | | | | | | | | | | | | | | | | | |
| ATHLETE’S CLUB: | |  | | | | | | | | | | | | | | | | | | |
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| ATHLETE’S COACH: | |  | | | | | | | | | | | | | | | | | | |
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| **ATHLETE’S T-SHIRT SIZE** | | | | | | | | | | | | | | | | | | | | |
| Check one: | YOUTH LARGE | |  | | SMALL | | |  | | | MEDIUM | |  | | LARGE | |  | | XL |  |
| (All Sizes Adult unless noted) | | | | |  | | |  | | |  | |  | |  | |  | |  |  |
|  | | | | | | | | | | | | | | | | | | | | |
| PARENT SIGNATURE: | |  | | | | | | | | | | | | | | | | | | |

***You will only be considered if this application is received via email by the deadline of Monday, April 22, 2019 by 12:00pm.***