



San Ramon Valley
Livermore Aquatics



SRVLA

2009 Fall Rec Program

The SRVLA 2009 Fall Rec Program is a competitive swim program with an “everybody swims, everybody wins” atmosphere.

Program Dates & Times:

- Program Dates: September 8 – December 31, 2009;
Monday – Friday
- Practice times are between 4:00 – 7:00pm
Swimmer's actual practice time will be based upon skill level & ability.

Program Fees:

Ages 6-9
\$400

Ages 10-12
\$450

Ages 13+
\$500

Program Requirements:

- This is a pre-paid program. No refunds. Payment is due by September 8, 2009. Please make checks payable to SRVLA.
- Space is limited. Participants are on a first come, first served basis
- Swimmers must have a U.S. Swimming Card. U.S. Please fill out the attached U.S. Swimming form. An additional fee of \$33.00 will be required and made payable to Pacific Swimming.

For more information contact Head Coach, Richard Thornton at
rtinthwater@aol.com or call 925-833-2407



USA SWIMMING

2008 SEASONAL ATHLETE REGISTRATION APPLICATION

LSC: PACIFIC SWIMMING (PC)

FALL SEASON (September 10, 2007-February 6, 2008)

SUMMER SEASON (April 5, 2008-September 1, 2008)

THIS MEMBERSHIP IS ONLY FOR MEETS BELOW ZONE, SECTIONAL AND NATIONAL LEVELS.

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

LAST NAME, LEGAL FIRST NAME, MIDDLE NAME

PREFERRED NAME, DATE OF BIRTH (MM/DD/YY), SEX (M/F), AGE, CLUB CODE, NAME OF CLUB YOU REPRESENT

FATHER/GUARDIAN LAST NAME, FATHER/GUARDIAN FIRST NAME, MOTHER/GUARDIAN LAST NAME, MOTHER/GUARDIAN FIRST NAME

MAILING ADDRESS

CITY, STATE, ZIP CODE

AREA CODE, TELEPHONE NO.

U.S. CITIZEN? YES NO

ARE YOU A MEMBER OF ANOTHER FINA FEDERATION? YES NO

IF YES, WHICH FEDERATION:

- DISABILITY: A. Legally Blind or Visually Impaired, B. Deaf or Hard of Hearing, C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment, D. Cognitive Disability such as mental retardation, severe learning disorders, autism

- RACE AND ETHNICITY (You may make up to two choices if appropriate): D. Black or African American, R. Asian, S. White, T. Hispanic or Latino, U. American Indian & Alaska Native, V. Some Other Race, W. Native Hawaiian & Other Pacific Islander

MAKE CHECK PAYABLE TO:

PACIFIC SWIMMING MAIL APPLICATION & PAYMENT TO: PACIFIC SWIMMING REGISTRATION 1034 WOODSTOCK COURT WALNUT CREEK, CA 94598

EMAIL: judy4pc@pacbell.net 925-933-0395

REGISTRATION FEE \$33.00

USA Swimming occasionally makes its membership list available to its marketing partners. Please notify USA Swimming's Member Services Dept. at 713-555-4578 if you do not wish to receive these mailings.

CHECK IF YOU WOULD LIKE TO LEARN MORE ABOUT USA SWIMMING'S COMMUNITY INITIATIVES

YEAR LAST REGISTERED

SIGN HERE x SIGNATURE OF ATHLETE, PARENT OR GUARDIAN



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