

SHARKS SWIM TEAM

2009-2010 OPEN REGISTRATION FORM

Last Name _____ Date _____

Address _____

Home phone# _____

Mother _____ Wk# _____ cell# _____
 Father _____ Wk# _____ cell# _____

E-mail(s) _____

____ Military: _____ Branch _____ Active or _____ Ret.

____ Civilian _____ 9 months _____ 11 months

Your deposit of \$115 per swimmer will go toward your registration fees, VSI/USA Swimming fees, a Sharks t-shirt and team swim cap. You will receive your t-shirt & cap at the parents' meeting in August or during the first week of practice. Registration fee is NON-Refundable.

_____ X \$115.00 = _____

Swimmer(s) Full name (first, middle, last)	Date of Birth	T-Shirt size	Last team
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Swimmer #1	D.O.B.	_____	_____
Swimmer #2	D.O.B.	_____	_____
Swimmer #3	D.O.B.	_____	_____
Swimmer #4	D.O.B.	_____	_____

The undersigned family agrees to become a member of the Sharks Swim Team for the 2009-2010 season. As a member, the undersigned family agrees to comply with and be bound by the bylaws, rules and regulations and policies of the Sharks Swim Team, as well as **completion of the Annual Contract before September 1, 2009**. The team will provide anticipated program fees, our expected practice schedule and contract registration dates.

 Parent Signature _____ Date _____ Admin. Initials _____ Date _____

Treasurer's use only: CK # _____ AMT _____ DATE _____ POSTED: XL BM QB TM

Add'l T-shirts ordered: \$15 each - number of shirts: _____ sizes: _____

Add'l swim caps ordered: \$5 each for latex - number of: _____ \$15 each for silicone - number of: _____

Fins (all groups) \$24 per pair: 1-3 _____, 3-5 _____, 5-7 _____, 7-9 _____, 9-11 _____, 11-13 _____ # of: _____

Payment for add'l gear CK# _____ AMT _____ DATE _____ POSTED: _____