

**GJY/Team Unify Account Information Form**

**Swimmer Information:**

Last Name \_\_\_\_\_  
Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

**Required:**

**\*\*\*E-Mail** 1. \_\_\_\_\_  
2. \_\_\_\_\_

**\*Please list the email address or addresses that you would like us to send information**

**\*\*\*Cell-Phone** 1. \_\_\_\_\_ 2. \_\_\_\_\_

**\*Please list above the cell number or numbers that you would like us to use to send important text messages from the Parent's Club President and the Coaches.**

**Children's Names - (Middle Initial - Required)**

| <b><u>First Name</u></b> | <b><u>Middle Initial</u></b> | <b><u>Birth Date</u></b> |
|--------------------------|------------------------------|--------------------------|
| _____                    | _____                        | _____                    |
| _____                    | _____                        | _____                    |
| _____                    | _____                        | _____                    |
| _____                    | _____                        | _____                    |

**Family Information:**

Father/Guardian Name \_\_\_\_\_ Daytime phone \_\_\_\_\_

Mother/Guardian Name \_\_\_\_\_ Daytime Phone \_\_\_\_\_

**Emergency Information**

Emergency Contact (in case Father or Mother cannot be reached)  
Name \_\_\_\_\_ Phone \_\_\_\_\_

Medical conditions that the coaching staff should be aware of

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_