

LAWRENCE AQUAHAWKS SWIMMER REGISTRATION

How did you hear about the Aquahawks? _____

Have you previously been a member of the Aquahawks or participated in our summer programming?

Yes or No If so, what email address did you use? _____

Person who is responsible for paying the bill: (PLEASE PRINT CLEARLY)

First Name: _____ Last Name: _____

Phone Number: Home: _____ Cell: _____ Work: _____

(Please list a cell phone number to receive text messages for team communications)

Address (Please include Street, City, State & Zip):

Email: _____

(This will be used to sign in to your account. **This must be a Parent's email**)

Additional Emails: _____

(If a spouse would also like to receive emails, please list them here. You will be sent an email verification link for activation.)

Swimmer Information: (PLEASE PRINT CLEARLY)

First Name: _____ M.I. _____ Last Name: _____

Phone: _____ Address: _____

(If different than listed above)

Birth Date: _____ Gender: M or F (Circle one)

T-Shirt Size: _____ (Please indicate Youth or Adult size)

Invoices are emailed to you via our team website on or about the 1st of each month. Full payment of your invoice is due no later than the 20th of the following month. A **\$20** late fee will be charged to all accounts not current and/or not **completely paid in full**.

**A password will be issued to the billing email address only. This allows you to review your account via our website at any time at www.aquahawks.org.

For Staff Use Only:

Group: _____ Date Started: _____

Date Paid: _____ Amount Paid: _____ Check # _____