

# 2019 Swim Team Registration

(Child 1) Name \_\_\_\_\_  
Last First MI  
Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Gender: M/F School \_\_\_\_\_  
Allergies? Y/N (Please list) \_\_\_\_\_

(Child 2) Name \_\_\_\_\_  
Last First MI  
Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Gender: M/F School \_\_\_\_\_  
Allergies? Y/N (Please list) \_\_\_\_\_

(Child 3) Name \_\_\_\_\_  
Last First MI  
Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Gender: M/F School \_\_\_\_\_  
Allergies? Y/N (Please list) \_\_\_\_\_

(Child 4) Name \_\_\_\_\_  
Last First MI  
Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Gender: M/F School \_\_\_\_\_  
Allergies? Y/N (Please list) \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Parent Name (s) \_\_\_\_\_

Parent Phone \_\_\_\_\_

Parent Email \_\_\_\_\_

---

***For office use only:***

Amount owed: \_\_\_\_\_ Amount paid: \_\_\_\_\_ Receipt # \_\_\_\_\_

Amount owed: \_\_\_\_\_ Amount paid: \_\_\_\_\_ Receipt # \_\_\_\_\_