

2008 GATORS SWIM TEAM
Family Registration

Is your family a member of the Great Hills Country Club? Yes No

What neighborhood association are you a member?

Lakewood Jester Great Hills ___

I am not a member of any of the above neighborhood associations ___

Please register only those children who have swimming abilities (i.e. can swim the American crawl, no fear of water or separation difficulties). The first two weeks of practice is probationary for beginner swimmers. Coaches will have final determination of a swimmers readiness. Children who are unable to continue after the first two weeks will be offered a refund for registration.

SWIMMER #1

Name (First & Last) _____ Sex: Male / Female

Date of Birth ___/___/___ Age on June 1, 2008: _____

T-Shirt Size: Child S Child M Child L Adult S Adult M Adult L

SWIMMER #2

Name (First & Last) _____ Sex: Male / Female

Date of Birth ___/___/___ Age on June 1, 2008: _____

T-Shirt Size: Child S Child M Child L Adult S Adult M Adult L

SWIMMER #3

Name (First & Last) _____ Sex: Male / Female

Date of Birth ___/___/___ Age on June 1, 2008: _____

T-Shirt Size: Child S Child M Child L Adult S Adult M Adult L

FAMILY INFO:

FATHER

MOTHER

Name: _____

Work# _____ Cell # _____

E-Mail: _____

Swimmer's Address: _____

Swimmer's Home Phone: _____

Name: _____ Phone#: _____

Official supervision is provided only during the swimmer's own practice. Therefore, children must be supervised by a parent/guardian at all times other than specific practice times. Children are not permitted in the pool except during their scheduled practice time.

PAYMENT INFORMATION

Dues are \$125 per swimmer, non –member fee is \$50 per swimmer up to \$100 family maximum. Fee includes Gators Team t-shirt and swim cap. Additional t-shirts and Silicone swim caps are available for an extra fee.

Number of swimmers _____ X \$125.00 = _____

Non-member swimmers fee _____ X \$50.00 = _____ (**\$100 per family maximum**)

Additional t-shirts _____ X \$7.50 = _____

Small _____ Med _____ Large _____ XL _____

Silicone Cap _____ X 8.00 = _____

TOTAL = _____

Check # _____

Make Checks payable to “Gators Swim Team”

If you are not able to make it to registration please send this form along with your payment, Waiver and Volunteer commitment forms to:

Dana Schuneman
3215 Cherry Lane
Austin, Texas 78703