2014 Wildewood Marlins Swim Team Registration Form

Child's Name:		Age:	Sex:	M	F
Street Address:					
Home Phone #:		Cell Phone #:_			
Birth Date:		Current Grade	Grade:		
Parent's/ Guardian's Name(s):					
Email Address (Please Print Clear	·ly):			_	
Emergency contact (name and pho	one #):			_	
Parents: Please check the committ *Parents are required to volunteer	· / •		_		ımmer.
Check Description	Check	Description			
Awards		Lane Assignments			
Clerk of Course		Starter			
Computer		Setup & Cleanup			
Concessions		Stroke & Turn			
Heat Ribbons		Timing			
Team Photographer/Slide Shor	w				
Retirement Village Night		Other Special Events	•		
Print Name Signatur			Ī	Date	
*According to Article III of the Wild families are required to volunteer for participate when your child is swimm swim meet. Print your name and sign	events in which ning, the board h	their swimmer(s) pa as the right to remov	rticipate.	. If yo	ou do not
Please list child's previous swimn	ning experience	e (previous swim te	eams, les	ssons,	etc.):