Official Team Registration Form

Team (check one)

☐ Aronimink	☐ ACST	☐ Hidden Hollow	☐ Marple Newtown	☐ Martins Dam
☐ Pennypacker	☐ Ply-Mar	☐ Plymouth	☐ Rose Tree Woods	☐ Rose Valley
☐ St. Albans	☐ Stony Lane	☐ Swarthmore	☐ Wallingford	

Athlete Information

Last Name: _____ First Name: _____ Middle Initial: _____

Birthdate: _____ / _____ / _____ Age: _____ **(as of June 1, 2009)** Gender (M, F): _____

Did your child swim/dive for another team last summer? YES or NO (circle one)

If "YES," state the name of the club: _____

Does your child currently compete for another summer club team? YES or NO (circle one)

If "YES," state the name of the club: _____

**Note: SSL Rules prohibit swimmers/divers from competing for more than one summer club team during the SSL season*

Primary Mailing Information

Father's Last Name: _____ Father's First Name: _____

Mother's Last Name: _____ Mother's First Name: _____

Mailing Address: _____

_____

City: _____ State: _____ Zip Code: _____

Primary Contact Information

Home Phone: _____

Father's Office Phone: _____ Father's Cell: _____

Father's Email (please print clearly):

Mother's Office Phone: _____ Mother's Cell: _____

Mother's Email (please print clearly):