

PLY MAR SWIM AND DIVING TEAM REGISTRATION 2011



LAST NAME:

Please complete the registration form and mail with fee to:

Ply-Mar Swim Team
PO Box 182
Plymouth Meeting, PA 19462

Registration fee: \$50 per swimmer or \$150 maximum per family

This will be my _____
year swimming
for Ply-Mar: ↓

Swimmer Information:

Name: _____ Birthdate: _____ Age (as of 6/1/11) _____

Name: _____ Birthdate: _____ Age (as of 6/1/11) _____

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Name: _____ Birthdate: _____ Age (as of 6/1/11) _____

Name: _____ Birthdate: _____ Age (as of 6/1/11) _____

Did your child(ren) swim/dive for another club last summer? _____ If yes, name of club: _____

Does your child(ren) currently swim/dive for another club? _____ If yes, name of club: _____

_____ I give my permission for photographs of my child(ren) to be used on the Ply-Mar website.

_____ I do not give my permission for photographs of my child(ren) to be used on the Ply-Mar website.

If needed, I can volunteer at the following meets. Circle a minimum of two:

VARSAITY
Wednesday's 5:30 pm
6/22 Home
6/29 Home
7/6 Away
7/13 Home
7/20 Away

JUNIOR VARSITY
Tuesday's 9:00 am
6/28 Home
7/5 Away
7/12 Home
7/19 Away

Please complete the following ONLY if you are a new family to our program or there has been a change:

Family Information:

Father's Name: _____

Mother's Name: _____

Father's Cell Phone: _____

Mother's Cell Phone: _____

Mailing Address: _____

Home Phone: _____

primary e-mail address for swim team correspondence: _____

Team use only:

Paid: \$ _____

Cash or Check # _____

Initials: _____