

ALPINE HILLS SWIM TEAM REGISTRATION FORM

Swimmer's Name: _____ Age: _____ Birthday _____

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Parent's Information:

Mother's name _____ Mother's Cell # _____

Dad's name _____ Dad's Cell # _____

Address: _____

Home phone: _____

E-mail address: _____

Mother's work # _____

Dad's work # _____

FEES

AH Pool Members:

1st child \$115.00
2nd child \$105.00
3rd child \$95.00
Guppie \$85.00

Non-AH Pool Members

Non-Member 1st child \$160.00
Non-Member 2nd child \$150.00
Non-Member 3rd child \$140.00
Non-Member Guppie \$130.00

WAIVER

I hereby release Alpine Hills-Park Forest Swim Club, its employees and Alpine Swim Team from any and all responsibility regarding my child(ren) (listed above) throughout the course of the swim season.

Parent or Legal Guardian

Date: _____ Fee Pd: \$ _____ Cash/Ck# _____ Team Rep _____