

Sturbridge Woods Swim Team

REGISTRATION 2011

Parent/Guardian Names _____

Address _____

Parent E-Mail _____

Home Phone # _____ Work Phone # _____

Cell Phone #'s _____

| LAST NAME | FIRST NAME | M/F | BIRTHDATE | Age as of 6/15/11 | Pre-Team? |
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PLEASE NOTE: In order to participate in the Pre-team, swimmers must have their basic band. The basic band test consists of swimming one length of the pool and treading water for one minute. **NO EXCEPTIONS.** Pre-team runs from June through July. Exact dates to follow.

REGISTRATION:

\$_____ for _____ Swimmer @ \$90.00 First swimmer per family/Pre-team

\$_____ for _____ Swimmers @ \$80.00 Each additional swimmer per family

\$_____ for _____ Late fee per swimmer @ \$5.00 each after 5/13/11

\$_____ for _____ Set(s) of two personalized LATEX caps @ \$18.00/set

\$_____ for _____ Set(s) of two personalized SILICONE caps @ \$30.00/set

\$_____ **TOTAL DUE**

All team members need to order CAPS in 2011 to match the team suit!

Please Note: After 5/13/11, personalization is NOT available.

Make checks payable to *STURBRIDGE WOODS SWIM CLUB*

Mail to: PO Box 367, West Berlin, NJ 08091