

Junior Stingray Swim Team

2009 Application for Swim Team Membership

Participant's Name: _____

Age: _____ Sex: _____

Address: _____

City Zip

Home Phone: _____

Parent's Name: _____ Work Phone: _____

Email Address: _____

Emergency Contact: _____ Phone: _____

Swimmer Agreement: I agree to call Brenda if I am unable to attend practice. I understand if I fail to call I will receive an unexcused absence. Receiving more than three unexcused absences will result in being excused from the team. I agree to participate fully at each practice and meet. I will demonstrate good team spirit and respectful behavior at all times. I am committed to improving my own swimming ability and I will encourage teammates as they progress at their own pace. I understand that this program emphasizes fun and skill development.

Participant's Signature: _____

Parent(s) Agreement: I give permission for my child to participate on the Boys & Girls Club Junior Stingray Swim Team. I understand practice is for coaches and swimmers only. I will demonstrate good sportsmanship and model behavior at swim meets.

Parent Signature: _____

Practice: Tuesdays and Thursdays @ 2:00-3:30 pm beginning June 23nd.

Cost: \$20

In-House Swim Meet: August 4rd @ 4:00 pm