

RIVERSIDE/NORTH HARBOR STREAKS

REGISTRATION 2011 – Please fill out one form for each child

Last Name: _____
 First Name: _____ Sex: ____ Age (as of 6/1/11): _____ DOB: _____
 Address: _____
 Home Phone: _____ E-Mail: #1 _____
 E-Mail: #2 _____
 Parents' Names and Daytime Phone:
 Mother: _____ Phone: _____ Cell: _____
 Father: _____ Phone: _____ Cell: _____

Club Member (Check One): Riverside ____ North Harbor ____

Everyone swimmer will receive a t-shirt (please check size)
 Child Small ____ Child med ____ Child large ____ Adult small ____ Adult med ____
 Adult large ____

Check all that apply:
 My child is new to swim team this year: _____
 My child in 6 & under can swim the length of pool unassisted: _____
 My child can swim all four strokes (applies all except 6 & under): _____

Is there anything special we need to know about your child or children (allergies, special needs, medications, etc.)? _____

Meet schedule is listed below. Please **CROSS OUT** dates you are **NOT AVAILABLE** to swim:

WEDNESDAY, MAY 25	PRACTICE MEET	HOME	4:00
THURSDAY, JUNE 2	SPALDING WOODS	HOME	6:00
TUESDAY, JUNE 7	MOUNTAIRE/GLEN FOREST	HOME	6:00
TUESDAY, JUNE 14	HAMMOND HILLS	AWAY	6:00
THURSDAY, JUNE 16	SWIM-A-THON	HOME	2:00
TUESDAY, JUNE 21	MARK TR/PRINCETON SQ	HOME	6:00
TUESDAY, JUNE 28	BYRNWYCK	AWAY	6:00

To complete my registration and to be eligible to participate in swim team, I agree to volunteer at the following 3 meets (Every family must volunteer at 3 meets):

Date1: _____ Date 2: _____ Date3: _____

Please make checks for payable to: **Riverside Swim Team**. The cost is \$95 per child, maximum \$210 per family. Swimmers 15 and older are \$45. No registrations or refunds after May 15th.

Registration Fee: _____ Check Number: _____ Volunteer 3 Meets: _____