



MOUNTAIN CREEK SWIM CLUB

EMERGENCY CONTACT/MEMBER ID FORM

Please complete this form and return it with your yearly dues. This information will be used in case of an emergency for anyone in your household, and to verify our 2015 memberships. NOTE: email is our preferred method of all correspondence, so PLEASE be sure to include your email address.

Date _____

Parent's Name(s) _____

Children's Name(s) _____

Address _____

City _____ State GA Zip _____

Email: _____

In case of Emergency, please contact:

Primary Contact:	Secondary Contact:
Name	Name
Relationship	Relationship
Home Telephone Number	Home Telephone Number
Work Telephone Number	Work Telephone Number
Mobile Telephone Number	Mobile Telephone Number