

Swim Team Registration Form

	Registration Fee
1 child	\$95
2 children	\$190
3 children	\$285
4 or more children	# of children X \$90

Swimmers Name	DOB	AAU registration #

PAYMENT IS DUE AT TIME OF REGISTRATION
(Make checks payable to Lochearn Community Club)

Parent Info:		
Email:		
Home Address:		
Home #	Cell #	Work #
Emergency Contact:		

Total Due: _____ Date Paid: _____

Paid by CASH or CHECK (circle one) Payment received by: _____

Parent/Guardian Signature _____ Date _____