

SWIM TEAM REGISTRATION FORM

Swimmer's Last Name _____ First Name _____ MI _____

Swimmer's Preferred Name _____ Parent's/Guardian's Name _____

Swimmer's Birthday _____ Age _____ Gender _____

Mailing Address _____

City _____ State _____ Zip _____

E-mail Address _____

Home Phone # _____ Work Phone # _____ Cell Phone # _____

GROUP: Novice - \$30.00 Age Group - \$35.00 Jr Team I - \$41.00 Sr Team - \$47.00 Masters - \$30.00

PLEASE MAKE CHECKS PAYABLE TO: PALO ALTO COLLEGE

USA Registration Fee: Yearly - \$67.00

* Outreach Fee (swimmer must be enrolled in free/reduced lunch program): \$7.00

PLEASE MAKE CHECKS PAYABLE TO: ALAMO AREA AQUATICS ASSOCIATION

** First time swimmers will need to provide a **Birth Certificate**

Where did you hear about us? _____

Have you been involved with any type of swim program? i.e. summer league, learn-to-swim, or other club teams _____