



Avalon Golf and Country Club 2018 – Swim Team Registration

PARENT INFORMATION:

(Last Name) (Father's Name) (Mother's Name)

(Home Phone) (Father's Cell Phone) (Mother's Cell Phone)

Home Address

(Street) (City) (State) (Zip)

(Primary E-Mail Address)

SWIMMER 1 [Circle T-shirt size: YS YM YL AS AM AL AXL]

(Last) (First) (Mi.) (Nickname)

(Date of Birth) (Age on 6/1/18) CHECK IF NEW SWIMMER: _____

(List 2 Favorite Strokes)

SWIMMER 2 [Circle T-shirt size: YS YM YL AS AM AL AXL]

(Last) (First) (Mi.) (Nickname)

(Date of Birth) (Age on 6/1/18) CHECK IF NEW SWIMMER: _____

(List 2 Favorite Strokes)

SWIMMER 3 [Circle T-shirt size: YS YM YL AS AM AL AXL]

(Last) (First) (Mi.) (Nickname)

(Date of Birth) (Age on 6/1/18)

CHECK IF NEW SWIMMER: _____

(List 2 Favorite Strokes)

SWIMMER 4 [Circle T-shirt size: YS YM YL AS AM AL AXL]

(Last) (First) (Mi.) (Nickname)

(Date of Birth) (Age on 6/1/18)

CHECK IF NEW SWIMMER: _____

(List 2 Favorite Strokes)

REGISTRATION FEE

A registration fee of \$75 per swimmer must accompany this registration.

Number of swimmers _____ X \$75 = \$ _____ TOTAL

Please make checks payable to: Avalon Golf and Country Club.

ADDITIONAL FORMS REQUIRED

In addition to this registration form, every swimmer must have a medical form on file in order to practice and participate in swim meets. Parents must also sign the Youngstown Swim League code of ethics (one per family). All forms available at www.avalongcc.com.