

MONONA SWIM AND DIVE CLUB – 2011 REGISTRATION FORM

Name of Swimmer/Diver	Sex	Age (as of 6/1)	Birth date	Team Choices(s)	Swim Session	Shirt Size
_____	M . F	_____	_____	Swim / Dive	AM / PM	_____
Last name First name						
_____	M . F	_____	_____	Swim / Dive	AM / PM	_____
Last name First name						
_____	M . F	_____	_____	Swim / Dive	AM / PM	_____
Last name First name						

Swimmer/Diver's Address:

_____	_____
Home address	Phone
_____	_____
City Zip	Family e-mail – IMPORTANT!

Father: _____	Daytime Phone: _____
_____	Home Phone: _____
Address (if other than swimmer/divers)	

Mother: _____	Daytime Phone: _____
_____	Home Phone: _____
Address (if other than swimmer/divers)	

CALCULATING YOUR MONONA SWIM AND DIVE CLUB FEES:

Please use the chart below to determine your club fees. You can mail this form and your fees to our registrar: Sue McDade, 6301 Southern Circle, Monona, WI 53716, or bring it to the April 13th meeting at 6:30 p.m. at the Monona Community Center.

1 Swimmer/Diver @ \$205 (\$190 if paid by May 14) _____	Total Fees Received: _____
2 Swimmers/Divers @ \$410 (\$380 if paid by May 14) _____	Cash _____ or Check # _____
3 Swimmers/Divers @ \$575 (\$530 if paid by May 14) _____	Credit Card # _____
Additional \$75 fee for participants who swim and dive _____	Expiration Date: _____
TOTAL DUE: _____	Date Paid: _____

***** IMPORTANT** The Medical Release information on reverse side of form must be completed.
Every team member is also required to sign and return the release and waiver form included in this packet.
Without these forms and information, your child cannot participate! ***

Parent/Guardian Signatures

I agree not to hold the Monona Swim and Dive Club, coaching staff or any person connected to the team responsible for injuries incurred during team activities and/or transporting to and from said activities. I authorize a representative of the Monona Swim and Dive Club to transport my child in case of emergency.

Parent/Guardian Signature

Date

Throughout the season, members of our club may have the opportunity to photograph team members participating in our program. These photographs become some of our best marketing tools to encourage new kids to join our team. We also understand that some families prefer that images of their children NOT be shared in this manner. Please indicate your family's preference, by signing one of the following statements:

YES, it is OK NO, it is NOT OK To use photographs of my children in Monona Swim and Dive Club materials.

Parent/Guardian Signature

Date

YES, it is OK NO, it is NOT OK . To share our phone number and address with other members of the Club.

Parent/Guardian Signature

Date

MEDICAL INFORMATION

Child's Name:

Birthdate _____
Birthdate _____
Birthdate _____

In case a parent cannot be reached, call:

Name: _____ Name: _____

Phone (w) _____ (H) _____ Phone (w) _____ (H) _____

Address _____ Address _____

Relationship _____ Relationship _____

Doctor _____ Phone _____

Clinic _____ Address _____

Hospital preference _____

Insurance carrier _____ Policy number _____

Dentist _____ Phone _____

Clinic _____ Address _____

Please check here if your child has any medical problems or allergies that we should know about – attach a note with further details. NOTE: If your child is allergic to bees, it is your responsibility to supply the team with an Epi-pen.

Parents: Please fill out the form below to help us help you have a magic swim and dive team summer!

Name: _____ Phone: _____

As parents, we will help with ÷

_____ Home **swim** meets (circle) 6/11 7/9 7/16 7/23 _____ Home **dive** meets (circle) 6/10 7/8 7/15 7/22

At home swim meets, I would like to help with ÷

_____ Set-up _____ Snack bar _____ Timing _____ Clerk of Course

Note: All parents needed for clean-up!

I can also help with the fun stuff!

_____ I am willing to serve as the Chair / Co-Chair of the Social Committee

_____ Activities for my child's age group _____ Team pool pizza party _____ Potato Party

_____ Age group banner party _____ Annual picnic

SWIM/DIVE BUDDIES ... the best way to make a summer friend!

Each year we match up new, younger swimmers and divers with experienced, older teammates for a summer of fun and team camaraderie. Cheer your buddy on to victory - or at least a personal best!

Leave a note in their mail box. Share a baked potato or an ice cream sundae at a summer team party.

Young or old ... this is a great way to make summer swim and dive team more fun.

YOU BETCHA! I'D LOVE TO HAVE A BUDDY.

Name _____ M / F Age _____ Swim ___ Dive ___

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