

2015 Coachman's Trail Sharks Swim Team Registration

Parent/Guardians: _____

Phone #: _____ Cell #: _____ Address: _____

Email address(es) for communication: Please PRINT clearly

TSA regulations specify that the age group of the swimmer is determined by a June 1 cutoff based on the swimmer's birthday. For instance, a swimmer turning 11 on May 31 will swim the season as an 11-12 year old, whereas one turning 11 on June 1 will swim the season as a 9-10 year old.

The fee for all swimmers this year is \$85 per swimmer. (please add additional swimmers on the back of this form)

Swimmer (M/F): _____ DOB: _____ Age Group _____ Shirt size _____

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2015 Parental Agreement

- I will volunteer to work at swim meets.
- I will support the coach's disciplinary procedures.
- I will make certain that my swimmer(s) are at practice on time and ready to swim.
- I will make certain that my swimmer(s) are at the meets on time and property prepared.
- I will always show good sportsmanship.
- I am solely and totally responsible for my child's behavior at all Swim Team Functions.
- I will advise the coaching staff of all vacations and other known absences as soon as possible.

Parent/Guardian: _____ Date: _____

Please fill out this form and mail or bring along with your payment (made out to CT SWIM TEAM) to Deanna McDonald at 12100 Deer Run, Raleigh, NC 27614.

\$85 X _____ (number of swimmers)

Total cost = _____ Check # _____