

ARLINGTON FOREST CLUB SWIM TEAM 2007 Registration Form

Family Last Name:								
Street Address:								
City and Zip Code:	, VA							
Home Phone:		Pool Member #						
Mother's Name				Father's Name				
Work Phone				Work Phone				
Mobile Phone	Mobile Phone							
E-mail address(es) to use								
for Communication								
Emergency Contact other than parent	Home Phone		Work Ph				Mobile Phone	
								
	Registrat	ion F	ees:					
Swimmer's Name Birth date		Male or Female Circle			Winter Swim Program			
				Yes/No Circle Name of Program				
		М	F	Υ	N			
		M	F	Υ	N			
		М	F	Υ	N			
		M	F	Y	N			
Yes, I have more swimmers list	ted on a separate pag	e □						
Description						Total Due		
\$65 one swimmer (\$75 if not paid by June 11, 2007)						\$.00	
\$55 second swimmer (\$75 if not paid by June 11, 2007)						\$.00	
\$155 per family of 3 or more swimmers (\$200 if not paid by June 11, 2007)						\$.00	
\$10 equipment fee per family						\$	10.00	
Total Paid						\$.00	

Make checks payable to: Arlington Forest Club - Please deliver this Form and Payment to Ginnie Nicholas, Team Rep, by June 11th to save \$.