

GOWER SWIM TEAM REGISTRATION 2010

Family Last Name _____

Address (include city and zip): _____

_____ Check here if new address

Home Phone # _____ Cell Phone # _____ e-mail address: _____

Father's name & work # _____ Mother's name & work # _____

BIG TEAM SWIMMER'S NAME	YEAR IN SCHOOL	M/F	BIRTHDAY	AGE	T-SHIRT SIZE (YM YL YXL AS ,AM, AL, AXL, AXXL)	BIRTH	YEAR
				AS OF MAY 31		CERTIFICATE ON FILE	STARTED w/GOWER
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

GUPPY SWIMMER'S NAME

_____	_____	_____	_____	_____	_____	_____	_____
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This year we will be posting pictures from meets, practices and socials on the Gower Web site. If you DO NOT want your child's picture posted on the Web site please sign below.

I DO NOT Want My Child's Picture on the Web Site _____

See Information Sheet for fees payable. Please make check payable to GOWER Swim Team

For Information and to down load forms check the Gower Pool Website gowerpool.com

Questions, please contact Suzanne Sanders at swim@gowerpool.com

Form must be received by May 2nd to avoid late payment fee of \$10.00.

For Registrars Use Only

Fee Paid	_____	Computer Data Entered	_____
Birth Certificate Confirmed	_____	Pool Member Confirmed	_____
SAIL Waiver on File	_____		