

LRR SWIM TEAM REGISTRATION FORM

SPRING 2007

Get ready for a fun summer!

Dear Parents,

Please use this form to register your swimmers for the 2007 season. You must also complete the enclosed Emergency Information Form **for each child** (make extra copies, as needed). **Bring these forms, the registration fee (\$95 per child, check payable to "LRR Swim Team" with your swimmer(s) name(s) in the memo field) and your summer calendar** with you to the Stingray Registration and Volunteer Sign Up meeting, on **April 25th at 7:00 p.m.** in the Union Mill Elementary School cafeteria. There will be an introduction to the LRR Swim team and the Northern Virginia Swim League, where we will be competing in Division 2. **Then the Volunteer sign up Process for Meet Operation and Special Activities will commence.** If you cannot make the April 25th meeting, registrations will be accepted **in person** at Rec Center/Pool #2 on May 19th from 9:00am – 12:00pm and on May 23rd from 6:30pm - 8:30pm. Please contact Chris Knoble (knoblefamily@verizon.net) or Christel Hathaway (christelstingray@msn.com) if you cannot make any of the registration times.

<input checked="" type="checkbox"/> Parents' Names	<input checked="" type="checkbox"/> Home Phone	<input checked="" type="checkbox"/> Work Phone
Mother: _____	_____	_____
Father: _____	_____	_____
Address: _____	We plan to distribute a Stingray Directory with the information that is checked, (✓). Indicate what you don't want published by circling the information that you would prefer NOT to be included.	

E-mail Address, Cell Phones, Other Numbers:

<input checked="" type="checkbox"/> Name*: _____	Date of Birth: _____	Sex: _____	T-Shirt Size: _____
<input checked="" type="checkbox"/> Name*: _____	Date of Birth: _____	Sex: _____	T-Shirt Size: _____
<input checked="" type="checkbox"/> Name*: _____	Date of Birth: _____	Sex: _____	T-Shirt Size: _____
<input checked="" type="checkbox"/> Name*: _____	Date of Birth: _____	Sex: _____	T-Shirt Size: _____

**These (nick)names will be used on weekly postings, ribbons, records and trophies.*

Orders must be received by May 23rd in order to guarantee correct T-shirt size! (YM, YL, AS, AM, AL, AXL)

Physical Limitations: _____

The above listed children have my permission to join the LRR Swim Team and participate in team activities. I agree to abide by the Swim Team rules and the rules set forth by the LRR Pool Committee. I realize that running a swim team requires a tremendous amount of adult help. **I understand that I will be asked to volunteer for at least 5 meet Operation duties and 1 social activity. (see attachments for volunteer forms).**

Signature: _____ Date: _____



OFFICIAL USE, ONLY		Date: ____/____/____
Paid: \$ _____	<input type="checkbox"/> cash	<input type="checkbox"/> check (# _____)
<input type="checkbox"/> Volunteer Sign-up	<input type="checkbox"/> Emergency Forms	

In-Person Registration on April 25th, May 19th & May 23rd!

Swim suit try-on and purchase available at scheduled registration events