WESTMONT SWIM CLUB, INC.
2007 - 2008 REGISTRATION FORM

Today's Date: _____

FAMILY INFORMATION:

Last Name: _____ Father: _____ Mother: _____

Address: _____ Home Phone Number: _____

Father's Work Number: _____ Father's Cell Number: _____

E-Mail Address: _____ Mother's Work Number: _____ Mother's Cell Number: _____

Emergency Contact: _____ Relationship to Swimmer: _____ Contact Phone Number: _____

Do you want this information included in the Westmont Team Directory? _____ Yes _____ NO

Signature _____

How did you hear about Westmont Swim Club? _____

			T - SHIRT SIZE					
SWIMMER'S NAME FIRST, M.I., LAST	**SEX M / F**	**BIRTHDATE (MM/DD/YY)**	**YL (10-12)**	**YXL (14-16)**	**AS**	**AM**	**AL**	**AXL**