

Swim and Dive Team Application

Bond Holder's Name _____
Address _____
Home Phone _____ Work Phone _____
Emergency Contact _____ Phone _____
E-mail Address _____

FEES: All insurance costs are covered by the per child fee.

Swim Team - \$85.00 per child – You **must** include the signed Tri-County liability waiver and completed volunteer form

Dive Team - \$68.00 per child

Child's Name	Birth Date	Swim Fee	Dive Fee	Amount Due	T-shirt Size
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Personalized Swim Caps (optional) - \$15/pair (same name both caps)

Name to be printed	# pairs	Amount Due
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Team Fees (write in line 7 on dues form): _____

YOU MUST SIGN WAIVER ON REVERSE SIDE!!!

Debbie / Mary