Persimmon Creek Swim Team 2011 Registration Form
(Please Print)

Family's Last Name: _____ Committee Choice:_____

Parent/Guardians: _____

Address: _____

_____

E-Mail: _____

Phone: (H) _____ (C)_____ (W)_____

Team Members:	**Male or Female**	**D.O.B**	**AGE**
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____ # of swimmers @ $40.00 each ……..$_____

_____ Please include us in the PCST directory. ___ phone # ___ email address ___both

Relevant Medical Information:_____

_____

Fundraiser

We will be having on Swim–A-Thon on June 30th. We hope each swimmer will raise or donate $25. 00. Proceeds used to purchase new lane line holder, equipment, pace clock or snack bar repairs.

More information will be available at the parent meeting in the beginning of the season (date and time to be announced)

TOTAL PAID ……$_____
Cash___/Check ___ #_____ (Make checks payable to PCST)

Parent Signature:_____