



2012 SWIM TEAM REGISTRATION

Swimmer's Name	Date of Birth	Age on June 1 st	Health Concerns (if any)

Parent's Name	E-mail Address	Daytime Phone	Mobile Phone

Address	Home Phone

The Forest Knolls Pool, Inc., its officers, employees, coaches, meet officials, and all of its members are released from all claims for any injury sustained in connection with any practice, swim meet, or team event, or while traveling to or from any swim meet or team event.

Parent's Signature _____ Date _____

Registration Fees	Total
\$110 for the first swimmer in a family	
\$100 for the second swimmer	
\$90 for the third swimmer	
\$50 for pre-team	
Additional Donation for the Swim Team	

* \$300 maximum fee per family *

* 50% off for First Year Team Members (except pre-team) *

TOTAL: \$ _____

Make check payable to:
Forest Knolls Swim Team