

2009 Brookside Swim Team Registration Form

Cost: \$50.00 per 1 swimmer
\$85 per family

Payment received: Cash or check # _____
Amount paid: \$_____

Workbond check paid: \$50.00 per family yes/no check # _____ or cash

Championship Fee Paid # of swimmers: _____

Swimmer _____

Name: _____

Address: _____

Phone # (Home) _____ Phone # (Cell) _____

Phone # (Work) _____

Email Address: (Swimmer) _____ Parent email _____

Age: (as of June 30) _____ Date of Birth: _____

Parents' Names: _____

Did you swim in the winter? Yes _____ No _____ Team Name _____

Medical Problems (Asthma, Allergies, etc.)? Yes _____ No _____

If yes, please explain on back of page.

Emergency Information (person to call): _____ Telephone No. _____

Every parent is expected to help out. Positions needed for each swimming meet are listed below. The Parent Representatives for each team will make the assignments. If you cannot fulfill your assignment for that specific meet, it is up to **YOU** to find someone to cover for you. PLEASE CHECK OFF WHAT YOU WOULD LIKE TO DO. We will be asking every family for a **separate check for \$50.00 as a work bond** payment. When you have fulfilled your assignments, your check will be returned to you.

Swimming Positions:

- Announcer Runner Set up / Take down End of the year party
- Timer 50/ 50
- Starter/Referee Scoring
- Across the Board Ribbons
- Stroke & Turn Food Table

Please indicate here if you know that you are unable to work a certain meet date . Meets are scheduled for Wednesday evenings and Saturday mornings in later June and all of July. If you have any questions please email Santina D'Esposito at jdesposito@comcast.net

Please mail registration form and fee along with a separate check for the family workbond to:

Santina D'Esposito

12 Laila Court

Monroe Twp, NJ 08831