

# Elmhurst Swim Team 2007 - 2008 Registration Form

## SWIMMERS INFORMATION (PLEASE PRINT)

<u>First Name</u>	<u>Middle Name</u>	<u>Last Name</u>	<u>Age</u>	<u>Birth Date</u>	<u>Sex</u>
_____	_____	_____	____	____-____-____	____
_____	_____	_____	____	____-____-____	____
_____	_____	_____	____	____-____-____	____
_____	_____	_____	____	____-____-____	____
_____	_____	_____	____	____-____-____	____

## PARENT/GUARDIAN INFORMATION (PLEASE PRINT)

Mother/Guardian: \_\_\_\_\_ Father/Guardian \_\_\_\_\_

Street Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

### Swimmers Health/Medical Information (List for each swimmer)

Medical Condition: \_\_\_\_\_

Medication: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Doctor's Phone: \_\_\_\_\_

### Medical Release/Waiver

In case of an accident or illness regarding my swimmer(s), I request the coach/team representative to contact me. If either parent/guardian cannot be contacted, I authorize the coach/team representative to take such emergency action as may be deemed necessary. I agree to hold the Elmhurst Swim Team coaches, any team representative, or its Board members harmless for any actions taken under the direction of this release.

### EST Membership Directory

I give permission for EST to include swimmer(s)' names, parents' names, address, and telephone number in the EST Membership Directory which will be published for member use only.

### EST Meet Volunteer Commitment

I agree to volunteer for 2 Dual Meets, 2 shifts at December ISI Meet, and 1 shift at a Conference Meet - Silver or Gold (with the exception of High School swimmers, who are asked to volunteer at 2 ISI sessions and 1 shift at a Conference). EST is unable to operate successful meets without our member families serving as volunteers.

### EST Practice Cancellation/Pool Closing Awareness

I understand whenever there is an emergency school closing or pool closing due to snow day, pool technical problems, or other, swim practice will be cancelled and signs will be posted on the High School's front doors. Parents should check for signs prior to dropping swimmers off at the door.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**EST Fees and Definitions:**

Ages 10 & under, or attends Early Session: October 1 <sup>st</sup> through February Conference Meet	\$355*
1 <sup>st</sup> session only: October 1 <sup>st</sup> through November 30 <sup>th</sup>	\$180**
2 <sup>nd</sup> session only: December 3 <sup>rd</sup> through February Conference Meet	\$240**
Ages 11 & older, or attends Late Session: October 1 <sup>st</sup> through February Conference Meet	\$380*
1 <sup>st</sup> session only: October 1 <sup>st</sup> through November 30	\$195**
2 <sup>nd</sup> session only: December 3 <sup>rd</sup> through February Conference Meet	\$255**
High School Team - Boys 1 <sup>st</sup> session: October 1 <sup>st</sup> to mid-November & after high school session	\$185**
High School Team - Girls 2 <sup>nd</sup> session: December 3 <sup>rd</sup> through February Conference Meet	\$245**

**ISI Escrow Fee (optional)**

If your swimmer(s) **will not** be swimming in “away” ISI meets you do not need to pay this fee. \$ 70

**Cash/Check Discount**

\*A \$20 discount *per swimmer* is available when you make full payment of fees with cash or check by **OCTOBER 1, 2007** for the \$355 or \$380 FULL SESSIONS ONLY. -\$20

\*\*A \$10 discount *per swimmer* is available when you make full payment of fees with cash or check by **OCTOBER 1, 2007** for the 1<sup>st</sup> or 2<sup>nd</sup> SESSIONS. -\$10

**Multiple Swimmer Discount**

A 5% discount is available for families with two or more swimmers.

<u>EST REGISTRATION</u>	<u>Swimmers' First Names</u>	<u>#Swimmers</u>	<u>Amount</u>
Ages 10 & Under/Early FULL Session (5:30 - 6:30 pm)	_____	\$355x_____	= _____
1 <sup>st</sup> Session <b>Only</b>	_____	\$180x_____	= _____
2 <sup>nd</sup> Session <b>Only</b>	_____	\$240x_____	= _____
Ages 11 & Over/Late FULL Session (6:30 - 8:00 pm)	_____	\$380x_____	= _____
1 <sup>st</sup> Session <b>Only</b>	_____	\$190x_____	= _____
2 <sup>nd</sup> Session <b>Only</b>	_____	\$255x_____	= _____
High School Team-Boys (6:30 - 8:00pm)	_____	\$185x_____	= _____
High School Team-Girls (6:30 - 8:00 pm)	_____	\$245x_____	= _____
Make check payable to: <b>Elmhurst Swim Team</b>		<b>Session Sub-Total:</b>	_____
<b>FORM OF PAYMENT:</b>	CASH _____ CHECK # _____	<b>Cash/Check discount</b>	_____
		(If paid in full by October 1, 2007)	
		<b>5% multiple swimmer discount</b>	_____
		(Sub-Total x .05)	
		<b>ISI Escrow \$70X</b>	= _____
		<b><u>TOTAL FEES</u></b>	= _____

Mail in registration may be sent to: Nan Davis, EST Registrar, 325 E. Laurel Ave., Elmhurst, IL 60126