

Col. Crawford Summer Swim Team Registration Form

Swimmer's Name _____ Birth Date (mm/dd/yy) _____

Address _____
Street Address City, State Zip Code

Parent or Guardian #1

Parent or Guardian #2

Name _____

Name _____

Cell Phone _____

Cell Phone _____

Add this number to the text msg. group?

Add this number to the text msg. group?

Yes _____ No _____

Yes _____ No _____

Email _____

Email _____

Add this email to the list for updates?

Add this email to the list for updates?

Yes _____ No _____

Yes _____ No _____

Please check any areas where you are willing to volunteer:

Please check any areas where you are willing to volunteer:

Concession Worker _____

Concession Worker _____

Timer _____

Timer _____

Official _____

Official _____

Scorer _____

Scorer _____

Bullpen Worker _____

Bullpen Worker _____

Runner _____

Runner _____

Meet Set up _____

Meet Set up _____

Meet Tear Down _____

Meet Tear Down _____

Other _____

Other _____

CC Summer Team Fees – Total due first day of practice - \$60.00

Includes:

CC team fee, Hawaiian Invitational fees, and GMAC league fee.