

# South Metro Storm Swim Club

## Winter 2010-11 REGISTRATION FORM

New Member     Current/Past Member    Transfer  Club Name: \_\_\_\_\_

SWIMMER's NAME \_\_\_\_\_

(First)

(MI)

(Last)

BIRTH DATE \_\_\_\_\_

/

/

AGE \_\_\_\_\_

MALE

FEMALE

ADDRESS \_\_\_\_\_

PARENTS/GUARDIAN \_\_\_\_\_

PHONE: \_\_\_\_\_

E-Mail Address : \_\_\_\_\_

Cell Phone # \_\_\_\_\_

**\*\*\*Email address is needed for club communications (billings, meet information, practice time changes, etc.)**

<b>GROUP:</b>	<b>Ag1</b>	<b>Ag2</b>	<b>IG1</b>	<b>IG2</b>	<b>Jr</b>	<b>Sr</b>	<b>Maint</b>
Circle One:	\$200.00	\$290.00	\$365.00	\$365.00	\$420.00	\$470.00	\$260.00

### \$\$ FEES CALCULATION \$\$

SEASON FEE	\$ _____	(see fees above)
MSI Registration**	\$ _____	<b>(\$55.00 for 2010-11 year)</b>
		<b>MSI Seasonal Fee is valid through July 30th</b>
<b>FEES DUE:</b>	\$ _____	(Storm accepts Visa, MC, Discover, check or \$\$\$)

**\*\*A separate 75.00 volunteer deposit is required**

**\*\*If you have registered online you do not need to fill out this form**

All past season fees, including competition fees, must be paid in full before a swimmer is allowed to participate. After a two week trial period, for new members, swimmers are responsible for the entire fee. All fee adjustments must be approved by Storm .

**\*\* This section must be completed for the registration form to be accepted and the swimmer to begin the session \*\***

Yes     No    Include my family on the phone/address list that may be distributed to registered families each session.

Yes     No    My child's photo may be released to news agencies or published on the club website (www.mnstorm.org).

Yes     No    **Code of Conduct: I acknowledge that I have read through the code of conduct with my child, and we have signed page 2 of this form. \*See page 2 of this form.**

By signing this document, I give my child permission to participate in the South Metro Storm Swim Club practices and competitions. I also agree to all monetary and time commitments and understand the club's Code of Conduct and Volunteer Policy (see page 2).

**SIGNATURE** \_\_\_\_\_

*(Parent or guardian if the swimmer is under 18 years of age)*

**Date** \_\_\_\_\_

### TREASURER'S USE ONLY

AMOUNT PAID \$ _____	MSI Paid _____	VOLUNTEER DEPOSIT _____
CHECK # _____	Registration taken by: _____	(\$75) _____