

The Dolphins Swim Team Family & Swimmer Registration

Primary Contact Parent

First Name: _____ Last Name: _____
Primary Phone: _____ Alt. Phone: _____
Address _____
Primary Email: _____ Alt. Email: _____
Gender: M / F (circle one) _____

Secondary Contact Parent

First Name: _____ Last Name: _____
Primary Email: _____ Alt. Email: _____
Gender: M / F (circle one) _____

Swimmer

First Name: _____ Last Name: _____
Middle Initial: _____ Birthdate: _____
Gender: M / F (circle one) _____ Email: _____
Team swimmer last represented: _____
Name and date of last USA swim meet: _____

Parent Signature: _____ Date: _____