CHURCHILL VILLAGE SOUTH 2008 SWIM TEAM REGISTRATION FORM

SWIMMER(S): If you wish to register for the Churchill South Sundevils Swim Team, please understand that you will be expected to attend all scheduled practices Monday through Friday, barring illness, vacation, or other reason acceptable to the coach. If you hold a job and cannot make a practice time, please make other arrangements with the coach.

Please submit registration forms by FRIDAY, $MAY 16^{TH}$. Registration fees increase by \$20 per family for registrations received after May 16^{th} .

Submit registration form to (by mail or hand delivered)

Terri Stachura 13404 Winterspoon Lane, Germantown, MD 20874 (301-528-2431)

| NAME OF SWIMMER(S) | DATE OF BIRTH | T-SHIRT SIZE (Circle One) | Fee per Swimmer | Enter Amount Here |
|--|---|------------------------------------|--------------------|----------------------|
| 1 st | | YS YM YL AS AM AL XL | \$40 | |
| 2 nd | | YS YM YL AS AM AL XL | \$35 | |
| 3 rd | | YS YM YL AS AM AL XL | \$30 | |
| 4 th | | YS YM YL AS AM AL XL | \$25 | |
| 5 th | | YS YM YL AS AM AL XL | \$20 | |
| 6 th | | YS YM YL AS AM AL XL | \$15 | |
| VOLUNTARY CONCESSIONS CONTR | \$10 | | | |
| VOLUNTARY OPT OUT OF MEET SU | \$50 | | | |
| ****\$20 IF SUBMITTED AFTER FRIDA | \$20 | | | |
| TOTAL REGISTRATION FEES: | undevils | | | |
| PARENT(S): The CVS Homeowners As the operations of the swim team, but the your own time and energy during the seareas during the season, and for Invitation | re is more to be done. Reason. We expect each far | egistering your child(ren) is also | a commitm | nent to give |
| | | ring • Meet Setup • Mee | t Cleanup | |

| areas during the season, and for Invitationals. | | | | | | | | |
|---|-------------|---------------|-----------|-------------|--------------|--------------|--|--|
| | Meet Timers | • Concessions | Support • | Scoring • 1 | Meet Setup 🔸 | Meet Cleanup | | |
| In order to effectively coordinate support for our meets, please indicate those meets that your family will NOT be in town for: 6/21 (Sat) 6/25 (Wed) 6/28 (Sat) 7/2 (Wed) 7/9 (Wed) 7/16 (Wed) 7/19 (Sat) 7/26 (Sat) | | | | | | | | |
| Once registration is complete, the volunteer coordinator(s) will post the parent volunteer information for each meet. The volunteer coordinator(s) will also email this information to the parents 2 days prior to every meet to ensure everyone is aware of what roles they will be filling for that meet. | | | | | | | | |
| Parent Name | 2 | | | Parent Nai | me | | | |
| Street Addre | ess | | | Phone | | | | |
| ***** EMAIL ADDRESSES ARE REQUIRED – email is our primary means of communicating with you ***** | | | | | | | | |

(please provide more than one if you have work/home emails you would use)

Valid email address for contacting Parent(s)