

2009-2010 Kodiak Kingfisher Swim Club Registration

Parent/Guardian: _____

Mailing Address: _____

Phone: Home: _____ Work: _____ Cell: _____

Email Address: _____

Emergency Contact: _____

Swimmer #1 (circle one) Puffin AG Blue AG Gold JrBlue JrGold SrBlue SrGold
_____/_____/____ Male/Female

Last Name MI First Name DOB Sex

Ethnicity (circle one): African-American Hispanic Asian/Pacific Caucasian Native American Other

Swimmer #2 (circle one) Puffin AG Blue AG Gold JrBlue JrGold SrBlue SrGold
_____/_____/____ Male/Female

Last Name MI First Name DOB Sex

Ethnicity (circle one): African-American Hispanic Asian/Pacific Caucasian Native American Other

Swimmer #3 (circle one) Puffin AG Blue AG Gold JrBlue JrGold SrBlue SrGold
_____/_____/____ Male/Female

Last Name MI First Name DOB Sex

Ethnicity (circle one): African-American Hispanic Asian/Pacific Caucasian Native American Other

Swimmer #4 (circle one) Puffin AG Blue AG Gold JrBlue JrGold SrBlue SrGold
_____/_____/____ Male/Female

Last Name MI First Name DOB Sex

Ethnicity (circle one): African-American Hispanic Asian/Pacific Caucasian Native American Other

2009/2010 Monthly Dues: Puffins \$40 AGBlue \$60 AG Gold \$80 JrBlue \$60 Jr Gold \$80 SrBlue \$70 SrGold \$100

USA Swim Fees: Athlete\$63 Non Athlete\$46 Family \$90

As parent/guardian of the above listed swimmer(s), I understand our obligations to Kodiak Kingfisher Swim Club once we join, and agree to follow financial, fundraising and team requirements. I have read the 2009-10 KKF Handbook.

X _____

Registration Fee _____

(\$25 individual/\$50Family)

Dues #1 _____

Dues #2 _____

Dues #3 _____

Dues #4 _____

USA Swim Fee _____

(X Number of Swimmers)

Total Paid _____

Paid

Check Cash

My child may/may not have their photo or name appear on the KKF WebSite or local paper.

X _____