



# Swim Team Registration

You must pay for and be a member of the Woodridge Swim Club to participate on the Woodridge Swim Team. Please fill out all of the information below. If you have less than four swimmers participating, it is okay to leave blank fields on the form.

PARENT 1 NAME: \_\_\_\_\_

PARENT 2 NAME: \_\_\_\_\_

*Parents names should be the same as the ones used to complete your swim club membership.*

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HOME PHONE NUMBER : \_\_\_\_\_

PARENT'S CELL PHONE NUMBER : \_\_\_\_\_

SWIMMER'S PHONE NUMBER: \_\_\_\_\_

PARENT EMAIL : \_\_\_\_\_

\_\_\_\_\_

SWIMMER 1 NAME: \_\_\_\_\_

GENDER: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

AGE ON JUNE 1, 2019: \_\_\_\_\_ FREE T-SHIRT SIZE: \_\_\_\_\_  
(YS, YM, YL, YXL, AS, AM, AL, AXL, AXXL)

\_\_\_\_\_

SWIMMER 2 NAME: \_\_\_\_\_

GENDER: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

AGE ON JUNE 1, 2019: \_\_\_\_\_ FREE T-SHIRT SIZE: \_\_\_\_\_  
(YS, YM, YL, YXL, AS, AM, AL, AXL, AXXL)

Woodridge Swim Club  
PO Box 105, Lititz, PA 17543-0105  
(See page 2 for additional swimmers)

**Woodridge Swim Team Registration (Continued)**

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SWIMMER 3 NAME: \_\_\_\_\_

GENDER: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

AGE ON JUNE 1, 2019: \_\_\_\_\_ FREE T-SHIRT SIZE: \_\_\_\_\_  
(YS, YM, YL, YXL, AS, AM, AL, AXL, AXXL)

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SWIMMER 4 NAME: \_\_\_\_\_

GENDER: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

AGE ON JUNE 1, 2019: \_\_\_\_\_ FREE T-SHIRT SIZE: \_\_\_\_\_  
(YS, YM, YL, YXL, AS, AM, AL, AXL, AXXL)

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Mail to:

Woodridge Swim Club  
PO Box 105 Lititz, PA 17543-0105