

YPAC SWIM TEAM
2009-10 SWIM SEASON
FAMILY REGISTRATION FORM
PLEASE PRINT

Family Name _____

Parents' First Names _____

Address _____ City _____ Zip _____

Mother's E-Mail _____

Father's E-Mail _____

Home Phone _____

Mother's cell phone _____

Father's cell phone _____

Phone System for Messages – 1 or 2 numbers designated per family. No swimmer's phones, please.

1st number _____ home/cell _____ Verizon? _____

2nd number _____ home/cell _____ Verizon? _____

Volunteer Commitment 1st choice _____

2nd choice _____

Swimmer _____ Birthdate _____ T Shirt Size: YM YL AS AM AL AXL

Swimmer _____ Birthdate _____ T Shirt Size: YM YL AS AM AL AXL

Swimmer _____ Birthdate _____ T Shirt Size: YM YL AS AM AL AXL

Swimmer _____ Birthdate _____ T Shirt Size: YM YL AS AM AL AXL

____ I (we) authorize YPAC to publish and /or release photos that include my swimmer (s).

____ I (we) authorize YPAC to publish and/or release email addresses/phone numbers and addresses for the purpose of a team directory.

Parent or Guardian Name (Print)

Parent or Guardian Signature

Date

YPAC SWIM TEAM
2009-2010 SEASON
SWIMMER REGISTRATION FORM

Swimmer _____ Sex _____ Age _____ Date of Birth ____/____/____
Last First Middle

School Attending _____ Grade _____ Will you be competing for High School? YES NO

YMCA Membership Payment Information

Swimmers must be YMCA members in good standing. If they are not currently a member, a YMCA membership application must accompany this YPAC Swim Team Registration. This may be an Individual or Family membership. Financial Assistance is available for all participants through our YMCA Strong Kids Program. This applies to membership fees and swim team fees. Applications are available at the Front Desk.

YPAC Swim Team Payment Information

Swim Team Fees:

____ Regular Season \$525.00 or 4 months of EFT payments of \$131.25 initiating October 11, 2009
____ High School Girl \$425.00 or 3 months of EFT payments of \$141.66 initiating December 11, 2009
____ High School Boy \$275.00 or 3 months of EFT payments of \$91.66 initiating October 11, 2009

Multiple Swimmers: ____ Full fee for oldest swimmer ____ \$50 discount for 2nd swimmer ____ \$25 discount for 3rd swimmer

\$80.00 Activity Fee due at registration covers USA Swim Fee and the Team Concessions Fee

Authority for Pre-Authorized Monthly Fees Payment Plan

I (we) authorize and request the YMCA of Metropolitan Detroit to charge my (our) checking/savings account for YPAC fees. I (we) further authorize the financial institution to debit these fees.

Please withdraw monthly fees from my: ____ Checking Account ____ Savings Account ____ Credit Card

Checking/Savings Draft

Credit Card Draft (Visa, MasterCard, Discover)

Bank Name _____ Credit Card Type _____

Routing Number _____ Credit Card Number _____

Account Number _____ Expiration Date _____

Printed Name of Account Holder

Signature of Account Holder

Date



REG. DATE / OFFICE USE ONLY

REGISTRATION DATE grid

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

LAST NAME, LEGAL FIRST NAME, MIDDLE NAME fields

PREFERRED NAME, DATE OF BIRTH (MO/DAY/YR), SEX (M/F), AGE, CLUB CODE, NAME OF CLUB YOU REPRESENT fields

FATHER/GUARDIAN LAST NAME, FATHER/GUARDIAN FIRST NAME, MOTHER/GUARDIAN LAST NAME, MOTHER/GUARDIAN FIRST NAME fields

MAILING ADDRESS field

CITY, STATE, ZIP CODE fields

AREA CODE, TELEPHONE NO., FAMILY/HOUSEHOLD E-MAIL ADDRESS fields

U.S. CITIZEN? YES NO

ARE YOU A MEMBER OF ANOTHER FINA FEDERATION? YES NO

IF YES, WHICH FEDERATION:

DISABILITY:

- A. Legally Blind or Visually Impaired
B. Deaf or Hard of Hearing
C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment
D. Cognitive Disability such as mental retardation, severe learning disorder, autism

RACE AND ETHNICITY (You may make up to two choices if appropriate):

- Q. Black or African American
R. Asian
S. White
T. Hispanic or Latino
U. American Indian & Alaska Native
V. Some Other Race
W. Native Hawaiian & Other Pacific Islander

MAKE CHECK PAYABLE TO:

MICHIGAN SWIMMING, INC.

MAIL APPLICATION & PAYMENT TO:

MICHIGAN SWIMMING OFFICE
PO BOX 1784
MIDLAND, MI 48641-1784
Email: jbcartmill@hughes.net
231-690-5847

REGISTRATION FEE table with rows for USA Swimming Fee (\$46.00), LSC Fee (8.00), and TOTAL DUE (\$54.00)

YEAR LAST REGISTERED: IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2009, ENTER THAT CLUB CODE: LSC CODE: AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB:

SIGN HERE x SIGNATURE OF ATHLETE, PARENT OR GUARDIAN

USA Swimming occasionally makes its membership list available to its marketing partners. Please notify USA Swimming's Member Services Dept. at 719/866-4578 if you do not wish to receive these mailings.
Check if you would like to learn more about USA Swimming's community initiatives
Check if you would like to receive the electronic USA Swimming Newsletter (must be 13 years of age or older)