

2006 Tri-City Aquatic Club REGISTRATION FORM

Name of Swimmer(s)			
Swimmer #1. _____			
First	M.I.	Last	
Birthday: _____		Current Age: _____	
Month/Day/Year			
Group: _____			
Swimmer #2. _____			
First	M.I.	Last	
Birthdate: _____		Current Age _____	
Month/Day/Year			
Group _____			

Parent(s) names: _____
Addresses: _____

Home Phone: _____ Work: _____

Cell: _____ Email: _____
School: _____ Summer Team: _____

Registration fee: \$60.00 per swimmer
(This is for 2006-2007 USA Swimming Registration which covers a swimmer annually at both practices and meets)
Please make check for this amount made out to **TCAC**.