



2011 Summer Swim Program & Stroke Clinic Registration

Swimmer #1 Information:		Swim Team: \$110
Last , First _____		High Performance Training: \$150
Birth Date: _____ Sex: M F		Family Concession Fee: \$20
Stroke Clinic: \$30 / \$40 non-Pool Shark		

Swimmer #2 Information:		Swim Team: \$100
Last , First _____		High Performance Training: \$150
Birth Date: _____ Sex: M F		Stroke Clinic: \$30 / \$40 non-Pool Shark

**Please attach form for additional swimmers if needed.

NOTE: Most communication will take place via e-mail, especially pre-season. If no e-mail is available, please watch bulletin boards or check the website at <http://sppoolsharks.org>

Parent/Guardian #1:	
Last, First: _____	
Address: _____	
City, State, Zip: _____	
Work Place: _____	
Work Phone: _____	Home Phone: _____ Cell Phone _____
E-mail(s): _____	

Parent/Guardian #2:	
Last, First: _____	
Address: _____	
City, State, Zip: _____	
Work Place: _____	
Work Phone: _____	Home Phone: _____ Cell Phone _____
E-mail(s): _____	

- ← Check here if you live outside of the Sauk Prairie School District.
- ← Check here if you are a senior
- ← Check here if you are in high school and swim club at another location

T-shirt size: Youth: S M L XL Adult: S M L XL

Volunteer Sign up _____ (board initials)

One –half of payment due at registration. **Balance due June 1.** Mail final payment to Sauk Prairie Pool Sharks, P.O. Box 491, Sauk City, WI 53583. Direct questions regarding payment to a board member.

IMPORTANT CHANGE: All swimmers will be required to purchase pool pass from the Sauk Prairie Aquatics Department. You can obtain a pass at registration or at the Sauk Prairie Community Center (<http://www.saukpr.k12.wi.us/commcenter/index.cfm>) during their regular business hours.