

Spring Creek Registration Form 2020

Swim Team/Pre-Swim

Please Circle

Swimmer's Name_____Birthdate_____SwimTeam/PreSwim

Birthdate_____SwimTeam/PreSwim

Birthdate_____SwimTeam/PreSwim

Please fill out bold section.

Parent's Name_____

Address_____

Phone#_____ **Texting #**_____

E-mail_____

Emergency Contact Name/Number_____

Please list any medical conditions or other information coaches should be aware

of:_____

Resident Swimmer at \$60 plus additional swimmers at \$35 each \$_____

Non-Resident Swimmer at \$110 plus additional swimmers at \$85 each \$_____

Team Gear Order Form

T-shirts: Swimmer's shirt(s) YS, YM, YL, YXL, AS, AM, AL, AXL, AXXL

Size_____ Size_____ Size_____ Size_____ \$_____ **Free**_____

Additional Team Shirt(s) \$12/each

Size_____ Size_____ Size_____ Size_____ \$_____

Caps: Swimmers receive 1 latex Team Cap Free (**do not** include free cap below)

Additional Caps \$5.00 each # of **additional** caps _____ \$_____

Total: Make checks payable to Spring Creek Swim Team \$_____

Refund Policy: No refunds. In extenuating circumstances, manager may issue refunds less a \$35 administration fee if swim slots are filled.

Return Registration Forms to Catherine Scruggs, 5036 S. Greenbriar, Springfield MO 65804