



Wyoming Waves Swim Team
Registration Application

Date of Registration: _____

| Swimmer's Name (include middle initial) | Date of Birth |
|---|---------------|
| | |
| | |
| | |

Mother's Name: _____ Home Phone: _____
 Work Phone: _____ Cell Phone: _____
 Father's Name: _____ Home Phone: _____
 Work Phone: _____ Cell Phone: _____

Mailing Address: _____

E-Mail Address: _____

Fee Schedule – October through May

Schedule 1: Dues

Schedule 2: Fundraising

| | |
|---|-------------------------------------|
| 1 st Swimmer Monthly Dues \$55.00 * Annual dues \$396 | Monthly \$75.00 |
| 2 nd Swimmer Monthly Dues \$98.00 * Annual dues \$706 | Quarterly \$150 |
| 3 rd Swimmer Monthly Dues \$125.00 * Annual dues \$900 | Annual \$540.00 *(if paid up front) |

* Annual rates include a 10% discount.

There are no swim dues June – September for families who have been enrolled and in good standing for the entire swim season.

Fees are due on the 5th of each month.

A \$5.00 late fee will be assessed after that date unless arrangements are made ahead of time.

I have read and understand the fee schedule and agree to pay my dues in full monthly (parent signature) _____

Each family will be responsible for fund raising \$600.00 a year. This amount helps us to subsidize costs associated with managing and coaching the team. There will be four fund raisers scheduled per year to help families reach their goal.

I have read and I understand the fundraising obligation (parent signature) _____

All new swimmers have a free two week trial period.

TOTAL DUES PAYMENT: _____ \$ _____
 USA REGISTRATION FEE _____
 \$52.00 (ANNUAL FEE) X _____ SWIMMER (S) _____ \$ _____

TOTAL PAID TO WYOMING WAVES SWIM TEAM \$ _____