

South West Aquatic Team Information Sheet

Swimmer's Name(s): Last, First, age, Birth date _____

Mother's Name: _____ Cell Phone: _____

Work Phone: _____

Father's Name: _____ Cell Phone: _____

Work Phone: _____

Home Address: _____

Home Phone: _____

Email: _____

Emergency Contact: _____

We want to put pictures of team members on our website, Crawdads.org, or in articles for the newspaper, but need your consent. We will not put full names of any of the kids on the website or newspaper pictures.

I GIVE permission for pictures of my SWAT swimmer(s) _____
_____ to appear on Crawdads.org and possibly in newspaper
articles written about the team. Parent Signature _____

I DO NOT give permission for pictures of my SWAT swimmer(s) _____
_____ to appear on Crawdads.org and possibly in
newspaper articles written about the team. Parent Signature _____

We need volunteers.

I would be willing to do the following: (check all that apply)

Become a USA Official ()

Go to City/County/School District meetings ()

Help Coordinate Volunteers for meets, parties, timing etc. ()

Check Locker Rooms after practice: ()

What days are you available? _____

Help on Fundraising Committee for New Pool ()

Carpool () How many can you take in your car? _____

I am willing to do _____