



## FULTON FINS SWIM TEAM

**Ages: 5 – 18** \*Children MUST be 5 years of age by June 1 AND be able to swim the width of the City swimming pool.

**Registration Fee:** \$60 for the first child in a family, \$50 for the second child, & \$40 for each additional child.

**Coaches:** Sara McDaniel & Agnes Hatcher

### **Registration Deadline: May 22nd**

After May 22nd a \$10 late fee will be assessed!

**PRACTICE SESSIONS:** First Practice: June 1st

**Practice Days:** Mon., Tues.  
Thurs. & Fri.

Please select the division that your child will be participating in:

**ADVANCED SWIMMERS**  
 **BEGINNERS**  
 **ADVANCED BEGINNERS**  
 **INTERMEDIATES**

**8:45 – 9:45 A.M.**  
**9:45 – 10:15 A.M.**  
**10:15 – 11:00 A.M.**  
**11:00 – 11:45 A.M.**

\* **NIGHT PRACTICE 7:00 -8:00 PM**  
**(Monday, Tuesday & Thursday)**  
**\*NIGHT PRACTICE IS LIMITED TO FIRST 25 PARTICIPANTS**

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

Address: \_\_\_\_\_ Age (as of June 1st): \_\_\_\_\_

Did you participate last year ? \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Shirt Size: \_\_\_\_\_

Parents/Guardian: \_\_\_\_\_

Home phone: \_\_\_\_\_ Day phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Emergency Contact: (other than parent) \_\_\_\_\_ Phone: \_\_\_\_\_

#### **LIABILITY WAIVER**

As a parent/guardian, I assume all risk associated with this sports participation and the participant and I agree to hold the City of Fulton, the Parks and Recreation Department and its employees, agents, representatives coaches and volunteers harmless from any and all liability actions, causes of actions, debts, claims or demands of any kind and nature whatsoever which may arise by the participation in this program under the direction of the Parks and Recreation Department and/or the City of Fulton. The terms hereon shall serve as a release as well as an assumption of risk by the participant, the parents or legal guardians, all heirs, all family, estate, executor, administrator and all assignees, if any.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\* For Office Use Only \*\*\*\*\*

Amount Paid: \$ \_\_\_\_\_

Date: \_\_\_\_\_

Staff: \_\_\_\_\_