



# 2019 Zebulon Swim Team Registration

Register online at [zebulonswimteam.swimtopia.com](http://zebulonswimteam.swimtopia.com) by Sunday  
5/18/19 at and pay fee(s) no later than 5/25/18

Swimmer #1 Name \_\_\_\_\_

**Tee shirt size: (circle one)** YS YM YL AS AM AL AXL

Birth date \_\_\_\_\_ (m/d/y) Age (as of June 1) \_\_\_\_\_

Parent's Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

In case of emergency call: \_\_\_\_\_

Special medical conditions: \_\_\_\_\_

Can your child swim? Yes No If yes, what level swimmer is he/she?  
\*Beginner (can tread water & swim unassisted end-to-end)  
\*Moderate experience (swims like a fish, but doesn't know the strokes)  
\*Experienced w/a swim team (knows the four strokes done in competition)  
If no, does your child have a fear/anxiety related to the water? Yes No

Years on the Zebulon Swim Team: (please circle)  
99 2000 '01 '02 '03 '04 '05 '06 '07 '08 '09 '10 '11 '12 '13 '14 '15 '16 '17

Has he/she been on another swim team? Yes No How long? \_\_\_\_\_

Name of team \_\_\_\_\_

Would you be willing to assist coaches during practice, as needed? Yes No

## Additional swimmers:

**Swimmer #2** Name \_\_\_\_\_

**Tee shirt size: (circle one)** YS YM YL AS AM AL AXL

Birth date \_\_\_\_\_ (m/d/y) Age (as of June 1) \_\_\_\_\_

**Swimmer #3** Name \_\_\_\_\_

**Tee shirt size: (circle one)** YS YM YL AS AM AL AXL

Birth date \_\_\_\_\_ (m/d/y)      Age (as of June 1) \_\_\_\_\_

**Swimmer #4** Name \_\_\_\_\_ **Tee**  
**shirt size: (circle one)** YS YM YL AS AM AL AXL

Birth date \_\_\_\_\_ (m/d/y)      Age (as of June 1) \_\_\_\_\_



## Zebulon Swim Team Invoice/Receipt

Registration Fee per swimmer      \$110.00 X \_\_\_ = \_\_\_\_\_  
(t-shirt, swim cap, trophy, ribbons, & coaches' fee/50+ practices)

**And/or**

**Corporate Sponsor (over \$300 registration/swimmer fee waived)**  
Business \_\_\_\_\_ Sponsorship Amount \_\_\_\_\_

**Total** \_\_\_\_\_

cash \_\_\_\_\_ or check# \_\_\_\_\_ **Amount Paid** \_\_\_\_\_

Please make checks payable to: **Zebulon Swim Team**

**MC VISA AMEX Discover add 3% Number** \_\_\_\_\_

**Name on Card** \_\_\_\_\_

**Expiration Date** \_\_\_/\_\_\_ **Security Code** \_\_\_\_\_

**Receipt sent to cell:** \_\_\_\_\_ **or e-mail:** \_\_\_\_\_



**Meet Official Commitment/Sign up**  
**Zebulon Swim 2019**

**Parent Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Swimmer(s):** \_\_\_\_\_

**I will NOT be attending the following swim meets:**

**June 11** @ Lifetime Fitness

**June 18** @ Jewish Community Center

**June 25** Vs Planter's Walk

**July 2** Vs Crabtree

**July 9** @ Southhall

**July 16** Vs Raleigh Racquet

**I would like to work the following job(s): (circle 3 or 4)**

Scorer

Recorder

Timer

Kid pusher

Runner

Ribbon writer

Heat ribbons

Concessions

Place judge

\*Stroke & Turn Judge

\*Starter/ Announcer

\*Clerk of Course

\*jobs that require attending a clinic