

# BOYS & GIRLS CLUB OF CLIFTON



## SEAHAWKS APPLICATION

PRINT SWIMMER'S NAME: \_\_\_\_\_

SEASON YEAR: 2010-2011 FALL/WINTER: SEPT.17- MARCH 30

BIRTHDATE: (M/D/Y) \_\_\_/\_\_\_/\_\_\_ SEX: M / F (CIRCLE ONE)

**EMAIL ADDRESS: (REQUIRED)** \_\_\_\_\_

We will use this to send you important information regarding practices, meets and special notices!

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ FAX \_\_\_\_\_

PARENT'S NAME:

MOTHER \_\_\_\_\_ WORK# \_\_\_\_\_

FATHER \_\_\_\_\_ WORK# \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ RELATION \_\_\_\_\_

EMERGENCY PHONE: \_\_\_\_\_