

# BOYS & GIRLS CLUB OF CLIFTON SEAHAWKS APPLICATION 2011-2012



FALL/WINTER: SEPT.13- MARCH 30

SWIMMER'S NAME: \_\_\_\_\_  
(LAST) (FIRST)

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

**EMAIL ADDRESS: (REQUIRED)**

Please write an email address that is checked often. We will use this to send you important information regarding practices, meets and special notices! It is VERY IMPORTANT!

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

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

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

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

EMAIL \_\_\_\_\_ CELL# \_\_\_\_\_

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

EMAIL \_\_\_\_\_ CELL# \_\_\_\_\_

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

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

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