

Athlete's Information

First Name _____ Middle Name _____ Last Name _____

Preferred Name _____ Date of Birth _____ Grade (Year in School) _____ Gender (M/F) _____

Home Phone _____ Student Cell Phone _____ Student Email _____

Address _____ Student ID # _____

City _____ State _____ Zip Code _____

Parents Information

Fathers Name _____ Mothers Name _____

Fathers Work Phone _____ Mothers Work Phone _____

Fathers Cell Phone _____ Mothers Cell Phone _____

Fathers Occupation _____ Mothers Occupation _____



Medical Information

Emergency Contact _____ Emergency Phone _____

Medical Conditions _____

Medications _____

Swimming Information

Swimming Experience _____ Year Round [] _____ Summer Only [] _____ None [] _____

Swimming History (High School, Club Swimming, Summer Teams) _____

Swim Times

Stroke _____	Time _____	Distance _____	Yards[] / Meters []
Stroke _____	Time _____	Distance _____	Yards[] / Meters []
Stroke _____	Time _____	Distance _____	Yards[] / Meters []
Stroke _____	Time _____	Distance _____	Yards[] / Meters []
Stroke _____	Time _____	Distance _____	Yards[] / Meters []
Stroke _____	Time _____	Distance _____	Yards[] / Meters []
Stroke _____	Time _____	Distance _____	Yards[] / Meters []
Stroke _____	Time _____	Distance _____	Yards[] / Meters []

Questions or Comments

