

**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**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_