

Welcome to the Bellefonte YMCA Stingray Swim Team

Swimmer Information Form

Family Name _____

Swimmer Firstname(s): _____

Date of Birth(s): _____

Address _____

Home Phone/Cell _____

Parent(s)/Guardian(s) _____

Parent(s) Email Address _____

Best Form of Contact _____

Interested in Carpool? Yes No

Emergency Contact _____

Do you give permission for your private information to be published on a master parent list (name, address, phone number, carpool information? (List will only be available to team coaches and parents.) Yes _____ No _____

Do you give permission for your swimmer(s) photograph to be displayed on the bulletin board at the YMCA, Kepler Pool Board or the local press? Yes _____ No _____

Do you give permission for your swimmer(s) photograph to be posted to the Stingray website? Yes _____ No _____

Signature of parent/guardian: _____

Please complete the contact sheet for your family and return to the "Feldman" folder in the swim team mailbox.

