

WELCOME TO THE 2015 ORADELL SWIM TEAM!

Registration

Fee: \$30.00 per swimmer/\$60.00 max per family. Make checks payable to Oradell Swim Team.

Family Last Name: _____ Membership # _____

Phone: _____ E-mail: _____

Child's Name:	Date of Birth:	Age on 5/31/14:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Volunteers and Swimmer Availability:

One parent from each family is required to work 2 swim meets.
 Jobs include: *starter, stroke/turn judge, timer, ribbon writer runner, place judge, scorer, photographer, concession*

Once jobs are assigned, please find a replacement if you can't make it.

Volunteer Name: _____ Telephone: _____
 E-mail Address: _____

Swim Meet Dates	Child Available YES/NO	Volunteer YES/NO
Wed. 7/8	_____	_____
Sat 7/11	_____	_____
Wed. 7/15	_____	_____
Wed. 7/22	_____	_____
League Championship 8/1	_____	_____
County Championship 8/3-8	_____	_____

In person registration Thursday June 11th and Friday Jun 12th 4:30-6:30
 Registration forms can be picked up and dropped off at the swim club or mail registration to Swim Team Parent Association 384 Valerie Place, Oradell, NJ 07649

Questions: katydidwhat1990@gmail.com or cpburmaster@yahoo.com