



BOYS & GIRLS CLUB
OF PAWTUCKET

Swim Team Private Practices

Registration Form

Please select your child's swimming level and coordinating practice day preference below.

Fee: \$40 per session

**Please note: This program is only for current swim team members*

- Session 1, July 11 – July 21
- Session 2, July 25 – Aug 4
- Session 3, Aug 8 – Aug 18

Practice Schedule:

Monday – Thursday

10:30 – 11:30

Max per session: 20 swimmers

Date: _____

Swimmer's Name: _____ Birthdate: ____ / ____ / ____
First Last

Swimmer's Address: _____

City: _____ State: _____ Zip: _____

Primary Contact Name: _____ Relationship to member: _____

Please check preferred method for emergency contact.

Cell: (____) _____ Work phone: (____) _____ E-mail: _____

All communications will be sent to the Primary Contact listed on the Membership Form. To update this information, please complete the Member Update Form available at the Front Desk at the Boys & Girls Club of Pawtucket.

Secondary Contact Name: _____ Relationship to member: _____

Please check preferred method for emergency contact.

Cell: (____) _____ Work phone: (____) _____ E-mail: _____

Please list any new medical conditions since most recent membership renewal: _____

We are a non-profit organization that needs everyone's help to be successful. Please indicate on this form if you would like to contribute to our team to benefit your child and the whole program. Thank you!

Sponsor a child to participate on the Swim Team with a donation of: \$ _____

All participants must have a current Boys & Girls Club of Pawtucket membership for the duration of the session they are registered for. Registration fees are non-refundable. By signing below, I acknowledge that my child has permission to participate in the swim team program at the Boys & Girls Club of Pawtucket and both my child and I understand and will comply with all Club and pool rules.

• I acknowledge that lessons are first come, first serve and due to current restrictions put in place members cannot switch dates/times during the 5 weeks.

• Both my child and I, acknowledge that they must shower with soap and water prior to entering the pool.

Parent/Guardian Signature

Date

For Office Use Only

Membership Verified: Yes No Verified By: _____

Registration Fee Paid: Yes No Received By: _____

Please Return Registration Form to:
Boys & Girls Club of Pawtucket
One Moeller Place, Pawtucket, RI, 02860