

2019 / 2020 REGISTRATION FORMS
Non Competitive groups

Parents' Name: _____

{Please list BOTH parents}

Address: _____ City: _____ Zip: _____

Home Phone #: _____ (Leave blank if cell is primary phone)

Dad's work #: _____ Mother's work #: _____

Dad's cell #: _____ Mother's cell #: _____

Emergency Contacts: (Someone OTHER than a parent)

Name: _____ Phone #: _____

Name: _____ Phone #: _____

1st Email address: _____

2nd Email address: _____

Please be legible.

	Swimmer's Name	Middle Initial	Date of Birth	Group
1)	_____	_____	_____	_____
2)	_____	_____	_____	_____
3)	_____	_____	_____	_____

ALL CHECKS MADE PAYABLE TO FAST.

FINANCIAL OBLIGATIONS

REFUND POLICY

There are NO refunds after the 2nd class.

PAYMENTS **

To ensure there is adequate pool space and coaches, swimmers must be registered PRIOR to the start of each session. All payments are due with registrations.

Group	FALL	WINTER	SPRING
Development I / II (D)	9 / 24 - 11 / 26 \$ 185.00 10 weeks	1 / 7 - 3 / 10 \$ 185.00 10 weeks	4 / 14 - 5 / 19 \$ 135.00 6 weeks
Home school group (HMS)	9 / 24 - 12 / 3 \$ 340.00 10 weeks	1 / 7 - 3 / 12 \$ 340.00 10 weeks	4 / 14 - 5 / 21 \$ 220.00 6 weeks
Morning Workout (MW)	9 / 24 - 12 / 3 \$ 340.00 10 weeks	1 / 7 - 3 / 12 \$ 340.00 10 weeks	4 / 14 - 5 / 21 \$ 220.00 6 weeks

Sign up for 2 or more sessions and take off \$ 40.00 from the total.

MC / VISA Card # _____

Expiration Date: _____ 3 Digit Security Code: _____

Registration forms can also be faxed to (240) 554 - 1537
(Fax goes directly to team administrator. No one else has access)

I have read all the above and agree to abide by the terms stated above.

Signed

Date

ALL CHECKS MADE PAYABLE TO FAST.
MAIL TO; 14625 Baltimore Avenue # 291, Laurel, MD 20707

I have read and understand MAAPP (Minor Athlete Abuse Prevention Policy)
Link to policy can be found on our web page, under Fall 2019 / 2020 brochure.

Signed

Date