



**South Eastern Aquatics YMCA Swim Team**  
Registration Form for 2018-2019 Fall/Winter



Swimmer's full name: \_\_\_\_\_ Sex: M / F Birthdate: \_\_\_\_\_ Group: \_\_\_\_\_  
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Has any swimmer ever swam for another USA swim team? Yes No  
 If yes, which swimmer/team? \_\_\_\_\_ (If the swimmer has swam for another USA swim team, a transfer form must be completed.)

**Parent/Guardian Information:**

Name 1: \_\_\_\_\_ Name 2: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 City, Zip: \_\_\_\_\_ City, Zip: \_\_\_\_\_  
 Home phone: \_\_\_\_\_ Home phone: \_\_\_\_\_  
 Cell phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Group (09/18/18-3/19/19) 26 weeks	Fall/Winter SEA Fees per swimmer
Bronze	\$399.00
Silver	\$458.00
Gold	\$633.00
Senior – Full Season	\$788.00
Senior – High School Girl * (18 wks)	\$545.00
Senior – High School Boy ** (13 wks)	\$394.00

\* High school girl participating by 11/12/2018 \*\* High school boy participating 9/18/18-11/10/18 & 2/11/19-3/19/19  
 NOTE: Monthly Payment Plan Available – Please speak to Missy Reischl to make arrangements  
 Minimum payment due at time of registration: \$150

**SEA Registration fees:** = \_\_\_\_\_

**Multi swimmer discount** (2<sup>nd</sup> highest fee = 10% discount, 3<sup>rd</sup> highest fee = 20% discount, 4<sup>th</sup> highest fee = 30% discount): - \_\_\_\_\_

**Annual YMCA fee** (Fall renewals only) = \$50.00 per swimmer: + \_\_\_\_\_

**USA fee** (Age 9 & Up) = \$70.00 per swimmer: + \_\_\_\_\_  
 (Age 8 & Under: \$60.00/swimmer)

**Late registration fee** for returning swimmers (if registering after 10/2/17 – does not apply for HS girls) = \$25.00 per swimmer: + \_\_\_\_\_

Total due: = \_\_\_\_\_

\$ Past due: + \_\_\_\_\_

Less Family Fund money: - \_\_\_\_\_

**Worker spot Guarantee Check #:** \_\_\_\_\_  
 \$450 for (6) Worker spot obligations  
 (Note: HS girls must work 5 sessions - \$375, HS boys-4 sessions - \$300)

Date/Ck# \_\_\_\_\_ Paid at registration: - \_\_\_\_\_  
 Cash, Check, Money Order, or Credit Card accepted

**Fundraising Guarantee Check #:** \_\_\_\_\_  
 \$150.00 for Fundraising

**Balance due:** = \_\_\_\_\_

Date/Ck# \_\_\_\_\_ 2<sup>nd</sup> payment: - \_\_\_\_\_

Date/Ck# \_\_\_\_\_ 3<sup>rd</sup> payment: - \_\_\_\_\_

Date/Ck# \_\_\_\_\_ 4<sup>th</sup> payment: - \_\_\_\_\_

Date/Ck# \_\_\_\_\_ 5<sup>th</sup> payment: - \_\_\_\_\_

**SEA Referral:** \_\_\_\_\_  
 (New Families – Who referred you to SEA? Referral family receives \$25 in escrow fund)

\*I accept these liabilities as a member of SEA and will pay these and any applicable late fees by the required due dates (view schedule in grid above). I understand that in addition to this financial obligation, I also agree to work as a volunteer a minimum of (6) sessions at the SEA hosted meets as required. (Read Meet Worker Obligation Breakdown.) I understand that there will be an assessment of \$75.00 per session if I am unable to fulfill this obligation. I further agree to raise a minimum of \$150.00 for SEA through Fundraising by March 1, 2018. I understand that I will be assessed any balance of the \$150.00 that I do not raise by March 1, 2018. No Refunds will be issued, except with written medical documentation from physician.

Parent / Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

