



2010 OAK CREEK SWIM TEAM FAMILY INFORMATION FORM

(ISL applicants must be between 5 and 18 years of age as of June 1, 2010.)

Child #1: _____
First Name Last Name Date of Birth

Child #2: _____
First Name Last Name Date of Birth

Child #3: _____
First Name Last Name Date of Birth

Street Address: _____ **Zip Code:** _____

Parent #1: _____
First Name Last Name Home Phone

Mobile Phone

Parent #2: _____
First Name Last Name Home Phone

Mobile Phone

Primary Email _____
(All Orca information will be sent to this address and should be viewed regularly!)

Emergency Contact (other than parent):

Emergency: _____
First Name Last Name Home Phone

Please initial below (Parent or Guardian):

_____ I certify that I am the legal guardian of the child/children listed above.

_____ I certify that I am currently a resident of Oak Creek and that proof of residency will be provided in the form of a utility bill or an association statement.

Swimmers are accepted on a first-come, first-serve basis according to the OCST Registration Policy. I understand that receipt of this application does not guarantee team placement. I give permission to the OCST to publish my family info and photos in the OCST directory, on-line and in publications.

Parent/Guardian Signature

Date

Reg. # _____