

# CITY OF OLNEY TIGERSHARK SWIM TEAM REGISTRATION FORM

Student's Name: \_\_\_\_\_

Age: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_

## 2024 Swim Season

<u>Class</u>	<u>Time</u>		
Competitive Swim (Olney Swim Team, Mon-Fri)	8:00	9:30	11:00

\*\*\*\*\*REGISTRATION USE ONLY\*\*\*\*\*

City of Olney Youth 1st Child \$70 \_\_\_\_\_ Each Additional Child \$60 \_\_\_\_\_

Non-Resident Youth \$120 \_\_\_\_\_ Each Additional Child \$110 \_\_\_\_\_

DATE: \_\_\_\_\_ Amount PD: \_\_\_\_\_ Method: \_\_\_\_\_