



# WHITEHALL WAVES REGISTRATION

**1<sup>st</sup> Swimmer's Name:** \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

School: Gockley Steckel Middle High Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

**2<sup>nd</sup> Swimmer's Name:** \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

School: Gockley Steckel Middle High Grade: \_\_\_\_\_

Teacher: \_\_\_\_\_

**3<sup>rd</sup> Swimmer's Name:** \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

School: Gockley Steckel Middle High Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

\_\_\_\_\_  
Name of Parent/ Guardian: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip : \_\_\_\_\_

Telephone Number: \_\_\_\_\_ E-mail Address \_\_\_\_\_

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

Cash \_\_\_\_\_

Check# \_\_\_\_\_

If you are 14 or older and are interested in working in the concession stand, check off \_\_\_\_\_

Under coaches discretion if there is a discipline issue with a child, both parent and child will be notified. Please be aware this may result in removal from the waves program with no refunds.

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