

**FAMILY REGISTRATION SHEET  
SPRING / SUMMER 2011**

(Returning families do NOT need another registration form)

Parents' Name: \_\_\_\_\_  
{Please list BOTH parents}

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone #: \_\_\_\_\_

Dad's work #: \_\_\_\_\_ Mother's work #: \_\_\_\_\_

Dad's cell #: \_\_\_\_\_ Mother's cell #: \_\_\_\_\_

Emergency Contacts: (May NOT be 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.**

MAIL TO: 9518 Haddaway Place Laurel MD 20723