OFFICE USE ONLY

PAID $_____
CASH _____
CHECK _____

Barracuda Swim Team

REGISTRATION FORM

Return your Payment and completed registration form to:

Allen Park Community Services Office
14700 Moore
Allen Park, MI 48101

****We are no longer accepting registrations and payments at the pool****

* All payments and registrations should be made to the Allen Park Community Services office
* Payment is due at time of registration. **We will not be responsible for lost cash sent in**
* Registrations and/or payments will NOT be accepted at the pool
* CASH OR CHECK ONLY
* NO REFUNDS
* Returned Checks: There will be a $25 returned check fee for any check returned NSF.

For more information, please call the Community Services office at 313-827-2664

Child's Name_____ Male _____ Female _____

School _____ Grade _____ Date of Birth _____

Child's Name_____ Male _____ Female _____

School _____ Grade _____ Date of Birth_____

Child's Name_____ Male _____ Female _____

School _____ Grade _____ Date of Birth_____

Address _____ **City** _____

Phone (home) _____ (cell) _____

Parent's Email_____

I AGREE TO HELP AT ONE VOLUNTEER JOB THIS SEASON _____

SIGNATURE

Parent Name _____ **Parent's Signature** _____