



Indian Lakes Stingrays
 1313 Indian Lakes Boulevards
 Virginia Beach, VA 23464
 www.ILStingrays.com



2010 Swim Team Registration

Date _____ (circle one) YES NO I certify that I am allowing my personal information to be put on a public team directory

Parent(s)/Guardian(s) _____

Address _____ City _____ Zip _____

Home Phone _____ Cell Phone _____ Alt. Phone _____

E-Mail Address _____ Alt. E-Mail Address _____

Resident of Indian Lakes or have a IL Foundation Pool Membership? (circle one) YES NO

Registration Fees					
Indian Lakes Residents & Pool Members	1st Child	\$ 75.00	Non-Residents	1st Child	\$ 100.00
	2nd Child	\$ 50.00		2nd Child	\$ 75.00
	3rd Child	\$ 30.00		3rd Child	\$ 50.00
	4th Child	\$ 20.00		4th Child	\$ 30.00
	5th Child	\$ 10.00		5th Child	\$ 20.00
	Guppy 1st	\$ 50.00	Guppy 1st	\$ 75.00	
	Guppy 2nd	\$ 30.00	Guppy 2nd	\$ 50.00	

Swimmer's Preferred Name	Gender M/F	Birthday	Age on 6/15	Buddy (Y/N)	Shirt Size YXS-AXXXL	Reg. Fee
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Start Up Fee per Family (includes administrative, concessions, and misc money needed to run the team) \$20.00

Apparel Order (can only be paid with registration fees if paying in full) \$ _____

Total Registration (Circle One) Cash or Check # _____ \$ _____

Payment Plan 1/2 due at registration (Circle One) Cash or Check # _____ \$ _____

Balance due on June 17th (Circle One) Cash or Check # _____ \$ _____

By initialing on the on the line you agree to pay the following on a payment plan and understand all outstanding money is due on the date provided. If the balance is not paid you are aware that your child will be ineligible to swim till all money is paid in full. _____

Medical conditions:
 (i.e. allergies, asthma, diabetes, ADD/ADHD, Rx medications, etc.) _____

