



Ardmore Family YMCA

Swim Team Registration— Winter 2026

Child's name _____ Age _____ Birthdate _____

Child's name _____ Age _____ Birthdate _____

Child's name _____ Age _____ Birthdate _____

Parent Name _____

Address _____ City _____ Zip _____

Phone Number _____ Email _____

Contact Preference: ☐ Text Message ☐ Email ☐ Phone Call

Emergency Contact _____ Phone _____

Program Fee: \$200 per child

\$50 off for each additional swimmer.

Must Have Family OR Single Parent Membership

Please sign the required MINOR PARTICIPANT WAIVER & PHOTO RELEASE



YMCA use only

CASH (circle) | CHECK # _____ | CC Last 4 digits _____ Amount Paid: _____