



**City of Myrtle Beach – Cultural & Leisure Services Department
Recreation Division
Myrtle Beach Marlins Swim Team Registration Form**



Name of Swimmer: _____

Date of Birth: _____ Age _____

Street Address: _____ City/State/ZIP: _____

Grade: _____ School: _____ Sex (please circle): M or F

Home Phone #: _____ T-Shirt Size: _____

Father's Name: _____ Father's Email: _____

Father's Work #: _____ Father's Cell #: _____

Mother's Name: _____ Mother's Email: _____

Mother's Work #: _____ Mother's Cell #: _____

Medical Conditions: _____

**If you would like to participate in these activities and need disability related accommodations, contact Kathy Anderson at 918-2279.

Marlins Swim Team practices will be held at Pepper Geddings Recreation Center or Canal Street Recreation Center.

Annual Registration Fee: \$15.00 for City Residents / \$25.00 for Non-City Residents

Please select/check the appropriate group in which you wish to register your child. Adjustments may be made by coach if necessary:

- | | |
|---|---|
| <input type="checkbox"/> Pirahnas: Advanced | Monthly Dues: \$35 City Residents /\$58 Non Residents |
| <input type="checkbox"/> Clownfish: Intermediate | Monthly Dues: \$35 City Residents /\$58 Non Residents |
| <input type="checkbox"/> Sea Monkeys: Beginner | Monthly Dues: \$30 City Residents /\$50 Non Residents |

Comments/Requests made upon approval: _____

THIS PORTION TO BE COMPLETED BY RECREATION STAFF

___ City Resident ___ Non-City Resident ___ Received Handbook
 ___ Registration ___ Receipt Attached
 Cash or Check # _____

___ September Dues
 ___ Fall Dues

___ Insurance statement is signed and attached to this registration form.