

WOOD RIVER AQUATIC CENTER SWIM TEAM

Practice Begins June 7th - July 30th

Practice Time 7:00-9:00 a.m. Mon-Thru-Fri

Requirements

Must be able to swim the length of the 50 meter pool

Swim Coach - Bob Rettle

E-Mail - coachbob@edwyswim.org

Fee

\$80.00

**Registration: Make Checks Payable to WR Parks & Rec.
Wood River Recreation Department, 633 N. Wood River Ave,
Wood River, IL 62095 Phone: 618-251-3130**

NAME _____ MALE _____ FEMALE _____

BIRTH DATE ____/____/____ AGE _____

ADDRESS _____ CITY _____ ZIP _____ PHONE _____

ANY MEDICAL CONDITIONS? _____

EMERGENCY CONTACT _____ PHONE _____ RELATION _____

*** I, the undersigned parent or legal guardian of the above named child, do hereby consent and agree that the above named minor may participate in the Wood River Recreation Program. I understand and acknowledge that there are certain risks of physical injury associated with my child's participation in the above named program which may occur through no fault of any volunteer, participant, employee, or officer of the Wood River Recreation, the City of Wood River, and/or any other sponsor or party.***

SIGNATURE OF PARENT OR GUARDIAN _____

DATE _____ **WORK #** _____

QUESTIONS?? Call 251-3130.or visit www.wrparks.org

DATE: _____

AMOUNT PAID: _____

RECEIVED BY: _____

PLEASE DO NOT RETURN FORMS AND PAYMENT TO YOUR SCHOOL.