



LEARN TO SWIM CLASSES

and/or Summer Swim Team

at UPCOUNTRY (PUKALANI) POOL

Offered by: MAUI DOLPHINS SWIM CLUB

www.mauidolphins.org

Basic Entry Level & Beginner Learn to Swim

Mon June 14th - Thurs June 25th

Two 1/2 hour classes 3:15pm & 4:00pm daily

(Note: subject to cancellation or rescheduling if the county closes the pool for 10 days of maintenance)

Trying to schedule July class if interest

Cost: **\$31** Registration (USA-Swim insurance good through 8/31): \$31 per swimmer
PLUS either

\$50 for 10x 1/2-hr Learn to Swim class **OR \$40** monthly dues for swim team

For additional information, stop by the pool dail 4:30-6 during practice hours or contact Coach Malcolm Cooper: 280-4257 or by email: MalcolmWhy@Yahoo.com



USA SWIMMING

2010 SEASONAL ATHLETE REGISTRATION APPLICATION
LSC: HAWAIIAN SWIMMING

CHECK APPROPRIATE SEASONAL PERIOD:

SEASON 1 SEASON 2 INDIVIDUAL SEASON

REG. DATE / OFFICE USE ONLY

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THIS MEMBERSHIP IS ONLY FOR MEETS BELOW ZONE, SECTIONAL AND NATIONAL LEVELS.

PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

LAST NAME

LEGAL FIRST NAME

MIDDLE NAME

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PREFERRED NAME

DATE OF BIRTH (MO./DAY/YR.)

SEX (M/F)

AGE

CLUB CODE

NAME OF CLUB YOU REPRESENT

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IF UNATTACHED ENTER UN

FATHER/GUARDIAN LAST NAME

FATHER/GUARDIAN FIRST NAME

MOTHER/GUARDIAN LAST NAME

MOTHER/GUARDIAN FIRST NAME

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MAILING ADDRESS

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CITY

STATE

ZIP CODE

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AREA CODE

TELEPHONE NO.

FAMILY/HOUSEHOLD E-MAIL ADDRESS

U.S. CITIZEN?

YES NO

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ARE YOU A MEMBER OF ANOTHER FINA FEDERATION?
 YES NO

IF YES, WHICH FEDERATION:

DISABILITY:

- A. Legally Blind or Visually Impaired
- B. Deaf or Hard of Hearing
- C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment
- D. Cognitive Disability such as mental retardation, severe learning disorder, autism

RACE AND ETHNICITY (You may make up to two choices if appropriate):

- Q. Black or African American
- R. Asian
- S. White
- T. Hispanic or Latino
- U. American Indian & Alaska Native
- V. Some Other Race
- W. Native Hawaiian & Other Pacific Islander

MAKE CHECK PAYABLE TO:

Maui Dolphins Swim Club

MAIL APPLICATION & PAYMENT TO:

Maui Dolphins Swim Club
PO Box 880694
Pukalani, HI 96788

REGISTRATION FEE

USA Swimming Fee	\$26.00
LSC Fee	\$ 5.00
TOTAL DUE	\$31.00

YEAR LAST REGISTERED: _____

SIGN

HERE x _____

SIGNATURE OF ATHLETE, PARENT OR GUARDIAN

USA Swimming occasionally makes its membership list available to its marketing partners. Please notify USA Swimming's Member Services Dept. at 719/866-4578 if you do not wish to receive these mailings.

- Check if you would like to learn more about USA Swimming's community initiatives
- Check if you would like to receive the electronic USA Swimming Newsletter (must be 13 years of age or older)