

Fremont Hills

Country Club

Aquatics

Masters Swim Team Registration Form

Name: _____

Age: _____

Address: _____

Member # _____

City, State, Zip: _____

Home Phone: _____

Cost per Month: \$70 non-members

Cell Phone: _____

Drop-in Fee: \$10 non-members

E-mail: _____

OK to include on distribution list? _____

Please mark your preferred practice sessions

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6am – 7am	6am – 7am	6am – 7am	6am – 7am	6am – 7am	9am – 10:30am	8am – 9am
9am – 10:15am		9am – 10:15am		9am – 10:15am		
12pm – 1:15pm	12pm – 1:15pm	12pm – 1:15pm	12pm – 1:15pm	12pm – 1:15pm		

Current Status

Currently swimming? _____

How many days/week? _____ Yardage? _____ Time in water? _____

Current level of swimming ability: _____

What send off can you do 10 x 100 Yards Freestyle on? _____

What strokes do you like to do? _____

What strokes can you do? _____

What strokes are you unable to do? _____

Would you like to learn how to swim the strokes you cannot? _____

Are you registered with USA Masters Swimming? _____ Member Number: _____

My signature on this agreement indicates my desire to participate in the Masters Swim Program at Fremont Hills Country Club. I assume all risks and hazards incidental to participation and release Fremont Hills Country Club, its members, Officers, Directors, Agents and Employees from any liability.

Signature: _____ Date: _____

Print Name: _____

Non-members MUST check in at the Aquatics Office at the beginning of each month and pay by check or cash only. Failure to do so will result in the inability to participate until fees are paid. Use of the pool and other aquatics facilities are limited to the swimmer enrolled in the program only and include only the scheduled practice time.

For questions contact the Aquatics Office at 650.948.8261 x212 or aquatics@fremonthills.com.