FOREST HILLS SWIM TEAM REGISTRATION 2025

LAST NAME	FIRST NAME	MI	MALE/ FEMALE	DOB	AGE ON 6/1/25	SHIRT SIZE	ANY PHYSICAL LIMITATIONS?

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ E-mail address: _____

Guardian: _____ Office Ph: _____Cell Ph: _____

Guardian: _____Office Ph: _____Cell Ph: _____

I, _____ am the parent of a member of the Forest Hills Swim Team. In the event that during such a practice my child requires medical attention, I hereby give full authority to the Forest Hills Coaching Staff to authorize such medical treatment as is necessary in their judgment. I hereby release the Coaching Staff from all claims that may arise from the good faith exercise of this authority.

Emergency Contact Person: _____Phone #:_____

I understand that the Forest Hills Swim Team is managed entirely by parent volunteers under the direction of the Roanoke Valley Aquatic Association (RVAA). I agree to assist the team in meeting volunteer requirements by working two meets during the season in addition to the City/County meet at the end of the season. **Families are able to waive their volunteer requirements by paying $100 to the Forest Hills Swim Team. Please Contact Coach Brett if you wish to not volunteer. We will fill your slots with pool staff.**

Parent Signature_____Date_____

Remember without volunteers there can be no swim meets!

*****All Rates include team shirt if registered by 6/1/25*****
$110.00 – one swimmer $210.00 – two swimmers
$300.00 – three swimmers or more $50.00 – per adult swimmer

Non Member Rates (Swimmers will only be allowed at the pool for swim team functions) $200.00- per swimmer
$100.00 – per adult swimmer

Mail To: Forest Hills Swim Club, 24016 Carolina Ave. SW Roanoke, VA 24014
Contact: Coach Brett brett@foresthillsswimclub.com 540-797-7946