

Waterview Swim Club
2011 Single Child Membership Application
(For Children Ages 12 – 17 Only)

Single Child Information

Name: _____

Date of Birth: _____

Parent/Guardian Name: _____

Parent/Guardian Phone:
Home: _____ Cell: _____ Work: _____

Parent/Guardian Address: _____

Parent/Guardian E-mail: _____

Sponsoring Family Information:

Family Name: _____

Responsible Adult Name (Must be age 21 or older): _____

Responsible Adult Phone:
Home: _____ Cell: _____ Work: _____

Responsible Adult Address: _____

Responsible Adult E-mail: _____

I, _____, understand that I take full responsibility for the
Sponsoring Adult
safety and actions of _____ while at the Waterview Swim
Single Child
Club.

Signature of Sponsoring Adult

Date

I, _____, understand that _____
Signature of Parent/Guardian Single Child
is under the supervision and responsibility of _____ while at
Sponsoring Adult
the Waterview Swim Club.

Signature of Parent/Guardian Date

The application must be completed in full before being submitted for review.

Please return the completed application form and a check for \$150.00 payable to Progressive Pool Management, Inc. to:

Progressive Pool Management, Inc.
1810 Philadelphia Pike
Wilmington, DE 19809