



# DOCS REGISTRATION FORM (FIVE POINTS WASHINGTON)

**2011-2012 Season**  
**SESSION 3**

THIS DOCUMENT MUST BE COMPLETED FOR ALL SWIMMERS

SWIMMERS BEING REGISTERED		
FIRST NAME	MI	LAST NAME

FILL IN THE NUMBER OF PARTICIPANTS (QTY) FOR EACH ITEM, THEN MULTIPLY QTY BY COST TO GET THE TOTAL FOR EACH ITEM.

ITEM DESCRIPTION	QTY	COST	TOTAL
<b>2 days/week</b> MON & WED <b>Feb 13 – Mar 28</b>		<b>\$105</b>	
<b>4 days/week</b> MON thru THUR <b>Feb 13 – Mar 29</b>		<b>\$126</b>	
<b>TOTAL AMOUNT OWED TO DOCS....</b>			

**Mother's Name** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Father's Name** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

The email addresses will be used to communicate weekly news and other events.