SWIM AND DIVE TEAM REGISTRATION

Address:			State:	;	Zip:	
		2.45				
Phone:						
mail:						
mergency contact:						
ADULT VOLUNTEERS ARE D	ESPERATLY NEEDED TO	KEEP THE	SWIM/DIVE	TEAM AL	IVE!	
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Check box if you have	e a pool membership.		a Maria Maria			
Check box to volunteer!						
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injuries suffered by me or my child(ren) at any activity sponsored by these groups. I understand all persons participate in Town programs at their own risk. I agree that all photos taken during activities may be used by the Town of Pound Ridge for publicity.

Date _____

Signature