

LAKE HIAWATHA SWIM TEAM

REGISTRATION FORM – 2025 SEASON

Swimmer Information – Please Print

Last Name	First Name	DOB	Gender	Age as of 6/1/25	T-Shirt Size Youth S/M/L Adult S/M/L/XL
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Please list any health issues that the coaches should be aware of

Parent/Guardian Information

Last Name:	_____	First Name(s):	_____
Address:	_____	City:	_____
	_____	Zip:	_____
Home Phone #	_____	Cell Phone #	_____
Email:	_____	Emergency Contact:	_____

AGREEMENT: The Lake Hiawatha Swim Club and swim team are not responsible for any injuries of any kind either at practice or at a swim meet either on or off of the LHSC property. By signing this, you agree not to hold LHSC/LHST responsible for any injuries on or off of the grounds. It is assumed that your children are in good health and are able to participate in athletic activities.

Print Parent Name

Parent Signature	_____	Date	_____
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Swim Team Fee:

\$100 per swimmer LHSC Member

\$150 per swimmer Non-member

Total Swim Fee Paid: _____

Payment Type:
(Circle One)

Cash

Check

Refundable \$50 Volunteer fee
per family (Separate Payment)

Volunteer Fee Paid: \$50

Payment Type:
(Circle One)

Cash

Check

Questions: LHST Board Contact: Suzanne Cassimore or Parent Contact: Samantha Rice

Email: hiawathaswimming@gmail.com

Face Book: <https://m.facebook.com/hiawathaswimming>

LHST Website: <http://hiawathaswimming.co.nr/>

LAKE HIAWATHA SWIM TEAM

To increase our visibility and team members, we would like to utilize social media more.

Please find us on Facebook and Instagram!

Facebook: <https://m.facebook.com/hiawathaswimming>

Instagram: @Lakehiawathaswimteam

Swimmer Name:

Swimmer Name:

Swimmer Name:

By signing the below, I agree to allow my child's photographs to be shared on the Lake Hiawatha Swim Team and Swim Club's social medias.

Print Parent Name

Parent Signature

Date

Please be patient as we continue to update the social media platforms