

Donaldson Run Dive Team Registration Form 2008

<u>Name</u>	<u>Birthdate & Age</u>	<u>M/F</u>
1stDiver_____	_____	_____
2ndDiver_____	_____	_____
3rdDiver_____	_____	_____

Number of divers: _____ x \$80 = _____

Make Checks Payable to: **DRRA**

Name of Parent _____

Address _____

Telephone	Mother	Father
Home	_____	_____
Work	_____	_____
Cell	_____	_____

Pool Membership Number _____ E-Mail _____

Other Contact in Case of Emergency:

Name _____ Phone _____

Please circle any of the following meet dates that your diver(s) will NOT be available:

June 24 July 1 July 8 July 15 July 22

Please list any time periods when your diver(s) will NOT be able to attend morning practice. _____

Do you plan to attend evening practice regularly (after school ends) yes no

Please return to Pam Taylor, 3454 Roberts La., Arlington VA 22207, 703/525-4490