

Sedgwick Community Pool Swim Team Information

The Sedgwick Community Pool would like to welcome BACK the Swim Team for the 2021 season. If you are wanting to enroll in the Sedgwick Swim Team please complete the information on the second page and return it to either the City offices or the Sedgwick Community Pool. Cost is \$60 per person, (\$35.00 city registration fee, \$15.00 meet fee & \$10.00 t-shirt). Make payment out to, Sedgwick Sharks.

Dates and Times to Remember:

May 28th Sign ups sheets due

1st day of Practice - June 7th

Practices are held Monday through Thursday,

11 & up - 9am to 10am

10 & younger - 10am to 11am

Meet Dates

June 21st

July 5th

July 26th

August 2nd (Championship)

June & July meets will be at 6pm in Wichita at Aley Park.

Championship meet times will be different.

If you have questions or are just unsure about joining the Swim Team, please feel free to contact Pool Manager, Lisa Matson @ 316-214-4422, or email lisa16matson@gmail.com

We are looking forward to another exciting and successful swim season.

Swim Team Registration Form

Swimmer's Name: Last _____ First _____

Date of Birth: ____/____/____ Swimmer's Age: _____ Male / Female

Street Address: _____

Parent(s) Names: _____ Phone: _____

Parent(s) Names: _____ Phone: _____

Hospital _____ Doctor _____

Medical Conditions/Allergies _____

Shirt Size:	Youth Small	Adult Small	
	Youth Medium	Adult Medium	
	Youth Large	Adult Large	Adult X-Large

*any additional shirts for family/friends \$10 per shirt.

Total shirts ordered. _____

Release:

I hereby release any Coach, Instructor, Sedgwick Community Pool and any person connected with the Sedgwick Swim team and the City of Sedgwick from any liability and responsibility for injuries or damages. I acknowledge the fact that _____ is physically able to participate in this activity, and I will assume full responsibility for payment of all medical expenses that might occur as a result of participation.

I, _____, give permission to the coaches to obtain any medical
(Parent name)
treatment necessary for the health and well being of my child, _____.
(Child name)

Parent Signature _____ Date _____

Amount Due \$35 Registration fee + \$15 Meet fee + \$10 T-shirt cost = \$60 total

Check # _____ Cash _____ Amount _____

Forms can be dropped off at City Hall before May 27th after that date take to Pool