**2024-2025 Clinton Community YMCA Otter Swim Team Registration**

**Make sure the Front-Desk has updated information including payment information under your account. Membership prices are subject to change January 1st 2025. Regardless if your swimmer swims the entire 6 months, the remaining balance will still need to be paid. If you are paying monthly and sign up in a later month, you will still be obligated to pay for the entire 6 months and may need to pay more initially to catch up with the payments. The last monthly payment will be taken out February 8th, 2025. No refunds on partial or full payment(s).**

**Swimmer Information:**

 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Otter swimmers must have a YMCA membership. Membership type \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* One Time Fee of $350
* Monthly at $58.50 **(MUST be on auto draft.** **Comes out on the 8th of each month**)
* 6 Month Youth Membership $120.00
* Youth Membership $20.00
* Family $63.00
* Single Parent $53.00
* Scholarship % if applicable \_\_\_\_\_\_\_\_
* Mandatory Otters swim cap
	+ With name: **$14.00 x 2 cap minimum ($28)**

**(last name):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* + No name: $14.00
* **Optiona**l - Dual registered with YMCA &USA **(USA registration and fees are in addition to the YMCA fees and it is the parent’s responsibility to register for USA)**

**Grand Total for Swimmer …………………………………………………………………………………** $\_\_\_\_\_\_\_\_

 **10% discount will be applied for each additional swimmer**

**Parent Information (Please Print):**

 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (First and Last Name)

 Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (only if needed)

**Office Use Only: Date \_\_\_\_\_\_\_\_\_\_\_ Total Amount \_\_\_\_\_\_\_\_\_\_\_ Staff:\_\_\_\_\_\_\_\_\_\_\_**