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Adult Performance Camp Registration

Thank you for registering for the 2017 Adult Performance Camp. Please fill in the information below with the attendee's information. If you are registering for someone else, your information will be collected below. Once you submit this form you will receive an email with a link to the payment page. Your spot will be reserved, but not confirmed until we receive payment.

Camper First Name *

Camper Middle Name

Camper Last Name *

Preferred Name (if different than above)

Mailing Address *

Address Line 2

City *

State *

Zip Code *

Country *

Home Phone Number *

Cell Phone Number (camper must travel with a cell phone) *

Email Address *

USA Swimming Club/USMS Club Affiliation *

USMS Member ID (enter n/a if not a member - membership is required for camp) *

Date of Birth ***Gender *****Emergency Contact First Name *****Emergency Contact Last Name *****Emergency Contact Phone *****Secondary Email Address****Tax ID Number**

If registering on behalf of someone else, please enter YOUR contact information here:

First Name**Last Name****Phone Number****Email Address**