



WISC Team Communication Form

Swimmer Info:

Name: _____

Age (as of May 29, 2018): _____

Waiver Completed? YES / NO

T-Shirt Size (Specify adult or youth): _____

Contact Number (if available): _____

Parent Info:

Guardian #1: _____

Best Contact Number: _____

Email: _____

Guardian #2 (if applicable): _____

Best Contact Number: _____

Email: _____