

## SJ Mariners 2025-26 Swim Team Registration Form

	Full Name Last, First, Middle (nickname)	Birthday Month/Day/Year	Age	M/F
Swimmer 1				
Swimmer 2				
Swimmer 3				

Address(Street/Mailing, City, State, Zip):-

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

2<sup>nd</sup> Email: \_\_\_\_\_

Parent 1 Name: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Carrier: \_\_\_\_\_

Parent 2 Name: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Carrier: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Known Medical Conditions: \_\_\_\_\_

\_\_\_\_\_

Swimmers	Programs	Fee & T-Shirt Size	Size	Totals
	Swim Team Tee Shirt	\$15 T-shirt Size>>		
	USA 2025 Membership \$90 or ( *Flex 12U USA 2025 \$40 ) 2 Silicone Caps \$30 Family Volunteer Bond \$100 Yearly/ \$50 Winter only	(*Flex USA Mem = 2 or less USA Meets)	New USA	Parent/member will register/pay online
	High School & Fall Swim (9/9 – 11/21)	\$250 (1 <sup>st</sup> ) \$225 (2 <sup>nd</sup> , 3 <sup>rd</sup> )		
	Winter Swim Only (9/9 – 3/20/26)	\$650 (1 <sup>st</sup> ) \$585 (2 <sup>nd</sup> , 3 <sup>rd</sup> )		
	Yearly Swim (9/9 – 7/24/26)	\$850 (1 <sup>st</sup> ) \$765 (2 <sup>nd</sup> , 3 <sup>rd</sup> )		

**Total Due:**

***Please make checks payable to:***

***SJ Mariners, PO Box 66, Mays Landing, NJ 08330***

*Thank you*

I have read, understand and agree to abide by South Jersey Mariners Team Structure, Volunteer Bond Policy, Team Uniform Policy, Waiver and Middle Atlantic Swimming Minor Athlete Abuse Prevention Policy.

PARENT/GUARDIAN

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Print

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Signature

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Date

SWIMMER(S)

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Print

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Signature

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Date

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Print

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Signature

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Date