



DIAMOND HILLS MASTERS SWIMMING PROGRAM REGISTRATION

Swimmer's Name:	Member #:
Address:	
Phone:	
Email:	
Emergency Contact:	Phone:
Medical conditions or medications we need to be aware of?	

DAYS TIMES

MON	7:30 PM - 8:30 PM
TUE	7:30 PM - 8:30 PM
WED	7:30 PM - 8:30 PM
SAT	8:00 AM - 9:00 AM

Monthly C	harge to Membership for Unlimited Access to Workouts - \$20	For office use only
Quest	ions & Registration contact Gina Moats, Aquatics Director @ ginam@sparetimesportsclubs.com	Date Started:
		Payment Type:
	nust be a member of DHSC. All billing will be done on the first day of each	
welcome to	nning January 1, 2025. Swimmers are not required to, but are encouraged and register as a US Masters Swimmer at www.https://www.usms.org/. Written required to cancel.	New Membership #
Signature:	Date:	