



Crawfish Aquatics

Pool Address

7150 Bluebonnet Blvd.
Baton Rouge, LA 70810
Phone: (225) 769-4323

Mailing Address

10522 South Glenstone Place
Baton Rouge, LA 70810
Fax: (225) 706-1636

Swim School- Registration Form

Must be able to swim free & back without assistance to begin this group

Fall Semester – August 23 – December 9

Registration deposit \$57 (to go to 2011 USA Swimming Registration)

Group A – Mon & Wed or Group B – Tues & Thurs or Group C- Mon - Thur

Practice Times : 5 - 8 years old 4:30 - 5:30PM (\$200 for semester)

9 -13 years old 5:30 - 6:45/7:00PM (\$220 for semester)

***Four practices/week option is \$260 (4:30), \$280 (5:30) for semester

SWIMMER INFORMATION

Last Name _____

First Name _____ Middle Initial _____ Age _____

Birthdate ____/____/____ Gender: M F Group: A B 4 day option

First Name _____ Middle Initial _____ Age _____

Birthdate ____/____/____ Gender: M F Group: A B 4 day option

FAMILY INFORMATION

Parent/Guardian Full Name _____

Parent Guardian Full Name _____

Address _____

City _____ State _____ Zip Code _____

Phone #'s: home _____ M-Work _____

Cell _____ F-Work _____

*Email Address _____

**Please note that our primary communication will be through email and members are strongly encouraged to alert the office of any email updates. Families that choose not to provide email information understand that they may miss important updates and Crawfish Aquatics is not required to make specific contact in alternate formats to these individuals when announcements and practice changes are made.*

If paying by Credit card # _____ exp. Date _____

Pay full amount- Dues & Reg _____ Pay deposit/Registration only _____

For more information contact us by email : swimcraw@crawfishaquatics.com or call 225-769-4323

www.crawfishaquatics.com