PAYMENT FORM

Tidalwaves Registration Invoice – 2012 Season

Contact Information:

Name _____ ***Phone*** _____ ***email*** _____

		Qty.	Price (ea)	Totals
1st Swimmer Registration	*last name*	0	$400	$0
Additional Swimmer(s) Registration	*last name(s)*	0	$365	$0
High School Swimmer(s) Registration	*last name(s)*	0	$100	$0
Volunteer Buy-out Option		0	$500	$0
Total Registration Fee Due				**$0**

Registration Payment via Personal Check Payable To: **Tidalwaves Swim Team**

Mail To: Tidalwaves Swim Team
c/o Larkspur Recreation Department
240 Doherty Drive
Larkspur, CA 94939

In Person: bring completed form to:
Recreation Department Office at Piper Park
Open: Mon.-Thurs., 9 am-12 noon, 1-5 pm. (closed Fridays)

Fax: send completed form to 927-6758

Credit Card Deposit for Missed Volunteer Assignments

Credit Card Information:

Card: (select)

Name *(as it appears on card):*

Billing Address Street:

Card Number:

City: ***State:*** CA

Exp. Date: month year

Sec. Code (3-digit):

Zip Code:

Volunteer Commitment

I agree to fulfill our 2012 family volunteer commitment (20 pts) to the Tidalwaves Swim Team, and authorize Tidalwaves/City of Larkspur to charge my credit card account provided above for penalties assessed at the rate of $30 per unearned point.

Name: _____ Date: _____ Signature: _____