

**JASPER AQUATIC WILDCAT SWIMMING CLUB
PARTICIPATION AND FINANCIAL OBLIGATION FORM**

Masters Swimming Program

Name: _____

Billing Address: _____

Home Phone: _____ Cell: _____

Email Address: _____

Fee Total: _____

Payment Options:

Annual Fee: \$300.00

Bi-Annual Fee: \$180.00 / \$30.00 a month

Monthly Fee: \$35.00 a month

Participants must be registered with USMS – Annual Fee \$40.00

I agree to the above financial and membership obligations associated with the Jasper Aquatic Wildcat Swimming Club.

Athlete Signature: _____ Date: _____

Please make payments to:

JAWS, PO Box 362 Jasper, Indiana 47546

Swim Schedule

Monday, Wednesday, Friday 5:15am – 6:30am

Tuesday, Thursday 12:00pm – 1:00pm

