



Merrimack Valley YMCA  
Andover/North Andover Branch

### 2009 ANA SYNCHERS Synchronized Swim Team Registration Form

Child's Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 School Attending \_\_\_\_\_ DOB \_\_\_\_\_ Age (as of 9/01/08) \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Email address(s) \_\_\_\_\_  
 Mother's Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Father's Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Include all emails on team communications? Y N specify: \_\_\_\_\_

#### 2009 ANA Synchers Team Fees

Please check the level which applies to the registering swimmer.

CODE	PRACTICE GROUP	ANNUAL FEE	FEE FOR FOUR PAYMENTS
			OCT, DEC, FEB, APR
_____ #701	Novice Team	\$700.00	\$175.00
_____ #701A	Novice Team(2 <sup>nd</sup> practice day)	\$300.00	N/A
_____ #702	Intermediate Team	\$1050.00	\$262.50
_____ #702A	Inter.Team (3 <sup>rd</sup> practice day)	\$300.00	N/A
_____ #703	Age Group 10&Under	\$1,350.00	\$337.50
_____ #704	Age Group 11-12	\$1,450.00	\$362.50
_____ #705	Age Group 13-15 Team B	\$1,450.00	\$362.50
_____ #705A	AG 13-15 B(4 <sup>th</sup> practice day)	\$200	N/A
_____ #706	Age Group 13-15 Team A	\$1,650.00	\$412.50
_____ #707	Age Group 16-19	\$1,650.00	\$412.50

#### METHODS OF PAYMENT

\_\_\_\_\_ I am paying in full  
Fill in the information below

\_\_\_\_\_ I am paying total due in four payments  
Fill in Automatic Withdrawal Form (next page)

\_\_\_\_\_ Check    \_\_\_\_\_ VISA    \_\_\_\_\_ Master Card    \_\_\_\_\_ AMEX    \_\_\_\_\_ Discover

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

I understand that my child may participate in the competitive swim team program as long as their membership is current with the Merrimack Valley YMCA. By signing below I am stating that there is an active membership for my child. Please circle the correct membership type listed below.

Youth – Draft / Annual    expires on \_\_\_\_\_ OR Family – Draft / Annual expires on \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



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\*It is the goal of the Merrimack Valley YMCA to provide services for individuals and families who wish to participate in programs of the YMCA, regardless of their ability to pay. Financial assistance forms are available at the Member Service Desk and all information is strictly confidential.

## **AUTOMATIC WITHDRAWAL FORM**

**Merrimack Valley YMCA  
Andover/North Andover Branch  
Competitive Swimming Programs  
Monthly Automatic (Debit\* Or Credit Card) Withdrawal Information**  
\*Debit card must have a credit card logo

Name of Child/Swimmer \_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_

Your complete billing address for the Debit\*/Credit Card \_\_\_\_\_

Practice Group \_\_\_\_\_

TOTAL DUE IS: \$ \_\_\_\_\_ FEE FOR FOUR PAYMENTS IS \$ \_\_\_\_\_

BIMONTHLY PAYMENT PLAN allows you to pay TOTAL DUE in four payments that are due in October, December, February and April. FEE FOR FOUR PAYMENTS will be charged after the first of each month the payment is due.

I am aware that my commitment to the ANA Synchers Synchronized Swim Team is for the full season. I am responsible for the full fee for that season.

Please charge my card \$ \_\_\_\_\_ on the months the payment is due, until the total due is paid in full.

I authorize the Merrimack Valley YMCA, Andover/North Andover Branch, Synchro Swim Team representative to charge my account each month the payment is due until my total amount due is paid. I understand that I am responsible for the full season's fee.

Please check one of the following: \_\_\_\_\_ Visa \_\_\_\_\_ Master Card \_\_\_\_\_ Discover \_\_\_\_\_ Amex

Expiration Date: \_\_\_\_\_ Card # \_\_\_\_\_

Signature of Cardholder \_\_\_\_\_ Date \_\_\_\_\_

(please sign as it appears on your Debit\*/Credit Card)

If you have any question please call or email me at [MBamford@mvyymca.org](mailto:MBamford@mvyymca.org).

Thank you,

Maddie Bamford  
Competitive Teams Bookkeeper