

CEDAR LAKE SWIM & DIVE TEAM



2024 ENROLLMENT FORM



Parent/Guardian Information

Name: _____

Street Address: _____

Email: _____

Phone: _____

Select Your Team

Swim Team

Dive Team

Both

Participant Information

Names:

Ages:

Amount Due

Total # of participants x \$50 (Max. \$125/family)

Submit the amount due via Venmo (@cedarlakeecc.com), Zelle (treasurer@cedarelakeecc.com), or drop a check in the CLCC/CLLA mailbox at 114 Cedar Lake East.

Please complete this form and submit it either electronically to rinpetrillo@hotmail.com or place a hard copy in the CLCC/CLLA mailbox at 114 Cedar Lake East.

NOTE: If the payment of the fee presents a financial hardship, please contact Korinne Petrillo (rinpetrillo@hotmail.com) to discuss.