Start Date: _____ Group_____

ATAC SWIM CLUB, INC
Membership Application

Swimmers Name: _____
First Middle Last

Address: _____ City/State: _____ Zip: _____

Home Phone: _____ Male____ Female_____

Date of Birth_____ Previous Swim Club_____ Date Last Represented_____

How did you find out about ATAC? _____

Mothers Name: _____ Father's Name: _____

Cell/Work #_____ Cell/Work: _____

Email_____ Email_____

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Group Monthly Dues

_____Development
_____Future Champs
_____White
_____Aqua
_____Blue
_____Black
_____Senior Development
_____Seniors

Total Dues to Start	_____
Annual Fee (includes USA Registration Fee	_____
Total Start Up	_____

Every family must have a Credit/Debit Card on file. Dues will be billed the first week of each month. These fees are non refundable. You are responsible for the entire payment regardless of how many days your child swims. Prorating will ONLY occur for new members joining after the 15th of the month. Dues are figured on number of days in the water a year and then divided into 11 monthly payments. You will not be required to pay for August as we do very little swimming in August. A $50.00 reactivation fee will be charged for all reactivated accounts. Fund Raising activities will be held as needed Meet expense and other club fees and expenses will be charged to the card on file. **Please direct all billing questions to atac_treasurer@yahoo.com**

ATAC is a non-profit organization, has an operating budget based on fees and fund raising activities. We recognize that as members of this non-profit organization we will be required to volunteer time at various club events and functions. We hereby apply for membership in ATAC and agree to pay the dues and fees established by the Board of Directors.

_____ _____
Signature Date