

WILLOW GROVE SWIM CLUB
EMERGENCY CONTACT INFORMATION

CHILD INFORMATION CARD

FAMILY NAME: _____ MEMBER #: _____

Picture

Picture

Picture

NAME: _____

NAME: _____

NAME: _____

AGE: _____
as of Aug.31st

AGE: _____
as of Aug.31st

AGE: _____
as of Aug.31st

EMERGENCY CONTACT 1:

NAME _____

CELL PHONE NO. _____

OTHER PHONE NO. _____

EMERGENCY CONTACT 2:

NAME _____

CELL PHONE NO. _____

OTHER PHONE NO. _____