

Registration for programs, special events and trips will be taken during office hours: Monday through Friday, 9:00 AM - 5:00 PM. You may also register by mailing the registration form to the SWSRA office, along with the registration fee. Find downloadable forms on the web at www.swsra.com.

WINTER REGISTRATION DATES: NOVEMBER 29 - DECEMBER 10

Please note: Registration is on a first-come, first-serve basis. Programs/trips may be filled prior to the end of deadline dates.

Please fill out this form completely. Please update any information that has changed from the Master Registration form in the space provided below.

Participant's Name _____ Nickname _____
Address _____ City _____ Zip _____
Phone _____ Age _____ Birthdate _____

EMERGENCY INFORMATION

Name _____ Phone _____

WINTER PROGRAMS

Name	Fee Paid
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Aqua Therapy	___\$54 ___\$108
Best Buds	___\$36 ___\$72
Bowling I	___\$52 ___\$104
Bowling II	___\$52 ___\$104
Bowling III	___\$70 ___\$140
Bowling IV	___\$52 ___\$104
Bowling (Youth)	___\$52 ___\$104
Fun With Fitness	___\$20 ___\$40
Game Night	___\$28 ___\$56
Healthy Eaters	___\$24 ___\$48
Line & Square Dancing	___\$30 ___\$60
Open Swim	
Alsip	___\$42 ___\$84
Argo	___\$42 ___\$84
Petland's Pet Therapy	___\$4 ___\$8
___1/18 ___2/22 ___3/15	
Socialites	___\$60 ___\$120
Special Olympics	
Track & Field	___\$36 ___\$72
Special Olympics	
Swim Team	___\$45 ___\$90
Swim Lessons	___\$54 ___\$108
Social Seniors	___\$30 ___\$60
Theater Tuesdays	___\$60 ___\$120

Program Sub Total \$ _____ \$ _____
(R) (NR)

WINTER TRIPS & SPECIAL EVENTS

Name	Fee Paid	Transportation
	R	NR

Chicago Auto Show	___\$28 ___\$56	___Home Pick Up ___Home Drop Off
Cupid's Bingo Bonanza	___\$4 ___\$8	No Transportation Provided
Frosty's Winterfest	___\$5 ___\$10	No Transportation Provided
Horsin' Around	___\$38 ___\$76	___Home Pick Up ___Home Drop Off
March for March	___\$8 ___\$16	No Transportation Provided
Mardi Gras Mambo	___\$15 ___\$30	___Home Drop Off Available
Theater Night Group		
The "Drowsy Chaperone"	___\$12 ___\$24	No Transportation Provided
Tubular Tubing	___\$45 ___\$90	___Home Drop Off Available
Valentine's Dance	___\$24 ___\$48	___Home Drop off Available

Trip/Event Sub Total \$ _____ \$ _____ \$ _____
(R) (NR) (Trans.)

Program Sub Total \$ _____ \$ _____
(R) (NR)

TOTAL \$ _____ \$ _____ \$ _____
(R) (NR) (Trans.)

GRAND TOTAL \$ _____

I would like to make a donation of \$ _____ to SWSRA's Scholarship Fund!

TRANSPORTATION FEES:

ID	\$6 Round Trip
OD	\$8 Round Trip (within 10 miles)
OD	Over 10 miles (not available)
ID	\$3 Drop off Only or Pick up Only
OD	\$4 Drop off Only (within 10 miles)
OD	Drop off or Pick up Only (over 10 miles is not available)

Please indicate the location you will be using for pick-up and drop-off trips:

___APD ___BIPD ___JPD ___PHRF ___WCC

By providing your e-mail address, you give SWSRA consent to send you promotional materials (newsletters, flyers, etc.) through e-mail. You may request to be taken off SWSRA's mailing list at any time. Your e-mail address will only be seen and used by SWSRA.

E-mail: _____

(Please print clearly)



CHECK ONE