

Waukesha Express Swim Team

New Family Contact Information										
Parent Name(s):										
Address:										
	City:				Zip:					
Telephone (home):										
Cell Phone # (s):										
Work Phone # (s):										
E-mail Address(s):										
<i>If you are adding a new swimmer to an existing account please complete the below information for your new swimmer.</i>										
New Swimmer Name:					Preferred Name/Nickname					
<i>Please include swimmer's middle initial!</i>										
Date of Birth					Age					
School					Sex:	M	F			
New Swimmer Name:					Preferred Name/Nickname					
Date of Birth					Age					
School					Sex:	M	F			
New Swimmer Name:					Preferred Name/Nickname					
Date of Birth					Age					
School					Sex:	M	F			
<p>You will receive an e-mail with your login information for our website, www.waukeshaexpress.org.</p> <p>Please verify your account information on the My Account tab, and input your insurance information for your swimmer. Thank you.</p>										