

2025 FEC Stingrays Volunteer Commitment

Swim and Synchronized Swimming Teams

THIS FORM MUST BE COMPLETED IN FULL TO,

ENSURE THAT YOUR SWIMMERS ARE ENTERED INTO THE COMPUTER CORRECTLY.

S	wimmer Information:	Circle Gender	Returning Family	
Swimmer #1:		Date of Birth		(Circle one):
			F M	YES / NO
Swimmer #2:		Date of Birth	F M	
Swimmer #3:		Date of Birth	F M	Circle One:
				Swim Synchro
Swimmer #4:		Date of Birth	F M	
Parent or Guardian Inf	formation:			
Parent / Guardian Name (s	s):			
Primary Phone Number: _		_ Cell Phone:		
Email Address #1		Rewrite Email Address #1		
Email Address #2		Rewrite Email Address #2		
	e logon email for the family's account n you. Email Address #2 will also be s	, ,	· ·	e and the main way the
	Volunteer (Commitment Term	<u>ıs:</u>	
be deposited at the end job postings are availa	osters requires each family subn d of the season, provided ALL V able online or by emailing the VI s completion of their volunteer c	OLUNTEER SHIIP of Swim/Synchro	FTS for the season are co . Our program requires t	npleted. Volunteer he help of all team
<u>Initials</u> Each	Family is responsible for <u>Ten Sh</u>	nifts Total (PLEAS)	E INITIAL):	
Working Eight volunteer shifts (not hours) during the regular swim season (or the equivalent)				
Working Two shifts (not hours) during Championships (or the equivalent)				
Signi	ing–up for volunteer shifts at <u>wv</u>	vw.fecstingrays.or;	<u>g</u> .	
Failu	re of a family to meet its volunt	teer commitment v	vill result in forfeiting of t	the deposit.
Volu	inteer fee is forfeited if swimme	r quits on or after	June 1st of the season.	
I have read, understand,	and agree to FEC Stingray's Volun	teer Commitment:	Attach Check Here: Check#	
			Please post-date a check for	§350.00 made out to <u>FEC</u>
Print Name:			Boosters to August 1st.	
Sign & Date:			If volunteer shifts are not fu be deposited at the end	of the season. If hours