



FREE ONE WEEK SWIM TEAM TRIAL!

We would like to make it easy for you to get as much information about our team as possible. This trial will help you meet a lot of our wonderful coaches, swimmers and other parents. Please complete the form below and bring a copy of it with you on the first day of your free trial.

FIRST NAME

LAST NAME

DOB / /

PARENT'S NAME

PARENT'S PHONE #

PARENT'S NAME

PARENT'S PHONE #

STREET ADDRESS

CITY

STATE

ZIP CODE

EMAIL

FREE TRIAL START DATE

SELECT THE BRANCH FOR YOUR FREE TRIAL

Kapaolono

Kroc Center

Salt Lake

Waikele

VMAC (Waipio)

Coach George

Coach Kelsie

*Coach Kevin or
Coach Emmett*

*Coach Keith or
Coach Kiana*

VMAC (Waipio)

I,

, give permission for my child
to participate with HSC's 1 week free trial.

SIGNATURE

DATE / /

WE ARE HERE TO ANSWER ALL YOUR QUESTIONS!

Contact Marcelle Arakaki marcelle808@gmail.com at the conclusion of your trial period if you have any further questions about our club and registration.