

**WINE COUNTRY AQUATICS OF NAPA**  
**WCAN**  
**www.wcanwave.org**

**Annual Registration Information**

Attached are current U.S.A./Pacific Swimming membership, WCAN membership information, medical release and certification forms. Return completed forms to the pool at the next practice.

**\*\*Please understand we must have all forms completed and current registration paid for the purpose of insurance coverage before a swimmer is allowed in the pool.\*\***

Pacific Swimming Membership: Please fill out form and **attach a check written to Pacific Swimming in the amount of \$60** for each swimmer in your family. (For seasonal only/ partial year registration - \$38)

Enter the legal first name of the swimmer.

If the swimmer wants to use a "nickname" instead, enter that name as the "preferred name". The preferred name will appear on the registration card and can be used to enter meets.

Information about "other swimming affiliation" and "ethnicity" is strictly optional and does not need to be provided.

Medical Release: Complete one form per swimmer.

Membership Information: Include telephone and cell phone numbers where you can be reached as well as email addresses.

WCAN Membership Application and Certification: Read carefully all information concerning dues, annual family commitment fee and responsibilities to team. Parental signature is required for all swimmers under 18 years of age. Retain the parent copy for your records.

If you have any questions concerning registration forms, please contact Adrienne Amdahl 255-5159 or via e mail at [aamdahl@wcanwave.org](mailto:aamdahl@wcanwave.org)