FAST Information Sheet

Name: _____
Last First Middle

Birthday: _____ Citizen of _____
(country)

Email Swimmer: _____ Swimmer's Cell: _____

2nd Swimmer: _____
Last First Middle

Birthday: _____ Citizen of _____
(country)

Email Swimmer: _____ Swimmer's Cell: _____

3rd Swimmer: _____
Last First Middle

Birthday: _____ Citizen of _____
(country)

Email Swimmer: _____ Swimmer's Cell: _____

Address: _____
Street City Zip Code

Circle One: African American Asian Caucasian Hispanic Native American Other

Parents' Name: _____

Home Phone Number: _____ Emergency Number _____

Mom's Cell: _____ Mom's Email: _____

Dad's Cell: _____ Dad's Email: _____

Any health concerns: _____