

# ***SRJC SWIMMING***

## ***ALUMNI REGISTRATION FORM***

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Maiden Name (if applicable): \_\_\_\_\_

Years Swam for SRJC: \_\_\_\_\_

Years played Polo for SRJC (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Brief description of what you have been involved with since swimming at SRJC (school, work, family, etc.):

**DONATION** checks payable to: **SRJC Swimming Bear Cub Athletic Trust**

\$25 \_\_\_\_\_ \$50 \_\_\_\_\_ \$75 \_\_\_\_\_ \$100 \_\_\_\_\_ Other \_\_\_\_\_

Mail donations to: Coach McCormick, Swimming  
Athletic Department, SRJC  
1501 Mendocino Ave.  
Santa Rosa, CA 95401

Please continue to check our team web site for updated alumni information and varsity team coverage: **[http://www.santarosa.edu/for\\_students/athletics/womens-swimming](http://www.santarosa.edu/for_students/athletics/womens-swimming)**.

Please mail your completed form to the above address, email it to [jmccormick@santarosa.edu](mailto:jmccormick@santarosa.edu), or fax it to 707-524-1752,  
Attention: Jill McCormick.