

Swim Family's last name _____

CHECKLIST FOR COMPLETE APPLICATION PACKAGES 2009-2010

Returning Swimmers

- _____ **Registered with USA Swimming – See List (if not, must provide birth certificate to resume group practice) – Check ALL swimmers in family**
- _____ **All previous year's balances paid in full (if not, must pay balance to register)**
- _____ **Greenville Swim Club Application – 1 per swimmer**
- _____ **Policies and Financial Obligations Contract – 1 per family**
- _____ **Assumption of Risk and Release Form – 1 per family**
- _____ **Volunteer Commitment Form – 1 per family**
- _____ **Photo/Roster Release Form – 1 per family**
- _____ **Check for registration fee (\$95) – 1 per swimmer**
ck # _____

New Swimmers

- _____ ***Birth Certificate (copy only) required for all new swimmers!!!! – 1 per swimmer***
Due to insurance requirements, the swimmer MUST have a birth certificate & \$95 registration fee to enter the pool area for the swim evaluation. (The registration fee & birth certificate will be returned if the swimmer does not pass the swim evaluation.)
- _____ **Greenville Swim Club Application – 1 per swimmer**
- _____ **Policies and Financial Obligations Contract – 1 per family**
- _____ **Assumption of Risk and Release Form – 1 per family**
- _____ **Volunteer Commitment Form - 1 per family**
- _____ **Photo/Roster Release Form – 1 per family**
- _____ **Check for registration fee (\$95) + check for first month's dues – 1 per swimmer**
\$95 registration fee + \$ _____ dues = \$ _____
ck# _____ ck# _____

Paperwork submitted date _____
Collected By _____

Greenville, NC Practice Facility
WELCOME TO THE GSC 2009-2010 SWIM YEAR
THIS IS GOING TO BE A GREAT YEAR!
****** INFO SHEET – PLEASE KEEP ******

RETURNING/NEW SWIMMER REGISTRATION INFORMATION

Swimmers may begin swimming on registration day provided that ALL paperwork is complete. **For liability reasons, a swimmer WILL NOT be allowed to swim until his/her paperwork is complete.**

Please complete and bring the registration packet to registration day. A check for registration and appropriate dues (if new swimmer) must also be included. The registration fee provides an annual membership to USA Swimming with a subscription to their magazine, GSC team t-shirt, & GSC swim cap. It also provides money towards the end of year swim banquet.

10 month payment plan for September 2009 – June 2010

Groups	September 2009 – June 2010
National	\$150.00
National Prep	\$140.00
Senior	\$135.00
Senior Prep	\$100.00
Gold	\$110.00
Silver	\$ 90.00
Bronze Advanced	\$ 75.00
Bronze I & Bronze II	\$ 60.00

Returning swimmers: Your swim team account from the previous year must be paid in full to register.

Sibling Discount Policy: \$5.00 off monthly fee for each additional sibling after the first child is paid at the regular month rate

Full Pay Discount: Swimmers who pay all ten months at the beginning of the swim year will receive a 5 percent discount off the entire balance.

Monthly Swim Fees are due by the 1st of each month . There is a late fee of \$15.00 after the 15th of the month. Swimmers with 45 day past due balances will lose swimming privileges on the 16th day of the subsequent month until the balance is paid in full. Please contact the treasurer, Jan Murphy, as soon as possible about any past due balances to prevent the loss of swimming privileges.

Payments may be dropped in the locked green box with a GATOR logo on the pool deck or mailed to:

Jan Murphy, Treasurer
Greenville Swim Club
107 Commerce Street, Suite A-1
Greenville, NC 27858

252-355-2653 – Account Inquires

****** Parking Info:** The parking lot in front of the Minges Pool is a “C” lot where cars may be ticketed if “C” stickers are not displayed. If you plan on staying in the lot for any length of time, please be aware that you may be ticketed if you do not purchase a parking pass from the ECU Traffic Authority on campus. A special “C” pass that costs \$20.00 per semester is available for swimmers only. During sporting events such as basketball games, your car will be TOWED if it is not parked in the lower lot down the hill from the pool. **DO NOT PARK** on the curb in front of the pool and leave your car. The ECU bus uses that space to reach its bus stop and will call for a tow truck to move you if it can’t get by.

GREENVILLE SWIM CLUB APPLICATION

2009-2010

(One form per SWIMMER in accordance with GSC and USA swimming regulations)

T-Shirt Size (please circle) Youth : S / M / L Adult : S / M / L / XL / 2XL

Swimmer's Legal Name: Last _____ First _____ Middle Initial _____

Preferred name: _____ Birth Date: _____ Age: _____ Gender: _____

Swimmer Cell #: _____ Swimmer E-mail: _____

Father's Last Name: _____ First Name: _____

Mother's Last Name: _____ First Name: _____

Primary Mailing Address: Street _____

City _____ State _____ Zip _____

Home Phone # _____

Father: Office Phone # _____ Cell Phone # _____

E-mail _____

Mother: Office Phone # _____ Cell Phone # _____

E-mail _____

******RETURNING SWIMMERS ONLY:** Current Swim Group Assignment: _____

Most recent swim year with GSC: _____

Other swimming affiliations: Junior High College
 Senior High Summer swim league
 YMCA/YWCA Masters
 Disabled Sports Organization

US Citizen: Yes No

DUAL Yes No If Dual or Non citizen, are you a member of another FINA association? Yes No

Please check if applicable:

Disability: Legally blind or visually impaired
 Deaf or hard of hearing

Physical disability such as: Amputations Spinal injuries
 Cerebral Palsy Mobility Impairment
 Dwarfism

Cognitive disability such as: Mental retardism Severe learning disorder Autism

Ethnicity (In accordance with US Census Bureau guidelines, you may select up to 2 choices if appropriate)

African American Hispanic Declined
 Asian or Pacific Islander Native American
 Caucasian Other

Our preferred method of corresponding with families and swimmers regarding any activity changes, newsletters, and other information is via e-mail. We have found this to be less costly and just as effective. Please list any additional e-mail addresses to the ones listed above that you would like to use when sending these announcements.

Additional e-mail: Father's/Mother's : _____

***Please advise us if you do not have access to email and would prefer hard copies.

Parent or Guardian's signature

Date

New Swimmers - Coaches ONLY: Swim Group (please circle):

**BRZ1, BRZ2, BRZADV, SILVER, GOLD, SPREP, NPREP, SENIOR,
NATIONAL**

2009-2010 GREENVILLE SWIM CLUB (GSC) – Greenville, NC Practice Facility
POLICIES AND FINANCIAL OBLIGATIONS CONTRACT – One per FAMILY

Family Name _____ Swimmer(s) Name(s) _____

Please initial each statement and sign at the bottom:

_____ I understand that GSC is a year-round swim club. GSC is required to pay the club's expenses and salaries 12 months a year. The monthly dues are calculated for ten (10) monthly payments, September through June. There will be no July or August payments, MEET REGISTRATION FEES ARE NOT INCLUDED IN THE MONTHLY DUES.

_____ I understand that the 10 Monthly Dues payments are as follows: \$150.00 for NATIONAL swimmers, \$140.00 for NATIONAL PREP swimmers, \$135.00 for SENIOR swimmers, \$100.00 for SENIOR PREP swimmers, \$110.00 for GOLD swimmers, \$90.00 for SILVER swimmers, \$75.00 for BRONZE ADVANCED, \$60.00 for BRONZE swimmers and are due and payable to GSC on the first day of each month. Fees may be placed in the green box at the pool or mailed to **Jan Murphy, CPA, PA, Greenville Swim Club, 107 Commerce St. Suite A-1, Greenville, NC 27858 (252-355-2653)**

_____ I understand that dues are to be paid by the 1st of the month and any dues not paid by the 15TH of the month are considered PAST DUE and a \$15.00 late fee will be charged to my account. (Anyone needing special financial arrangements please contact the club Treasurer, Jan Murphy @ 252-355-2653.)

_____ I understand that if my account becomes PAST DUE by 45 days (the 15th of the following month), swimming privileges will be suspended until my account is brought current. Late fees will continue to accrue until the balance is paid in full.

_____ I understand that if my swimmer(s) swims at least one time during the month, dues are payable for the entire month. There are no partial payments. Attendance is taken during all practices.

_____ I understand that the board of GSC will do everything possible to maintain the current dues structure for the 2009-2010 year: however, if it becomes necessary for them to modify the rate structure, I will be notified at least one month prior to the effective date.

_____ RESIGNATIONS: I understand that WRITTEN notice of intention to stop swimming must be given by the 1st of the month prior to stopping in the subsequent month. This notice can be mailed to Jan Murphy's office at the above address. Postmarks will be checked. Verbal notices to coaches or other club officials will NOT be accepted. Resignations dropped in the green box after the 1st of the month will not be honored for the subsequent month.

_____ I understand that if my swimmer(s) wishes to stop for any length of time, upon return to the team, I must pay one month's back dues and all balances must be brought current. Medical exceptions for an ENTIRE month can be made with a doctor's notice.

_____ FUND RAISING COMMITMENT: I understand that as a parent(s) of a registered swimmer, I am committing myself to participate in ALL fund-raisers for GSC, such as the annual swim meet, Gator-a-thon, and any other activities that require volunteer time in return for funds for the club.

_____ FUND RAISING COMMITMENT: I understand that there will be a minimum \$100.00 per family fund-raising commitment. This can be fulfilled by your swimmer raising money through sponsorship at the Gator-a-thon, or by cash payment, monthly or in full, by December 1st. Failure to pay by December 15th for the fund raising commitment will result in a late fee. (NOTE: For families joining after December 31st the fund raising requirement is lowered to \$50.00 per family and is due within 60 days of enrollment.)

_____ VOLUNTEER COMMITMENT: I understand that swimming requires a volunteer commitment either of time or product donation during the annual swim meet sponsored by GSC. One volunteer per family is required during this event.

_____ ADDITIONAL CHARGES: A fee of \$30-\$50 will be required in order to enter a swim meet, due at time of registration for the meet. This cost covers USA and NC Swimming meet charges, and coaches traveling expenses. There is a fee of \$30 to transfer from another USA swim team and a financial release from the previous team is required.

_____ I understand that the GSC board and GSC coaching staff, following guidelines as set by USA and NC Swimming, has the right to enforce all rules, regulations and conduct by all participants including swimmers(s) and parent/guardian(s). If at any time the GSC coaching staff, with approval of the GSC board, feels that any rules, regulations or conduct of any individual does not meet club expectations affirmative action will be taken in the form of warning, suspension or expulsion from the team. NO FEES WILL BE REFUNDED IN THE CASE OF SUSPENSION OR EXPULSION.

I HAVE READ, SO UNDERSTAND, AND AGREE TO ABIDE BY THIS CONTRACT BETWEEN MYSELF AND THE GREENVILLE SWIM CLUB.

Parent or Guardian signature _____ Date _____

ASSUMPTION OF RISK AND MEDICAL RELEASE
GREENVILLE SWIM CLUB 2009-2010
(ONLY ONE FORM PER FAMILY)

For and in consideration of membership for my minor child in the activities of Greenville Swim Team, Inc. dba Greenville Swim Club (GSC) for the period beginning August 17, 2009 and ending August 31, 2010 and for other good and valuable consideration the receipt of which is hereby acknowledged, I the undersigned, for myself and for my minor child, do hereby release and forever discharge GSC, all its officers, agents, and employees from and against any and all claims of damages, demands and actions and/or causes of action for personal injury, illness, death, and/or property damage arising from my child's participation in any activity of the Swim Club.

I hereby attest and verify that I have full knowledge of the risks involved in the sport of swimming; I assume those risks for myself and for my minor child; and I assume and shall be solely responsible for medical and/or emergency expenses resulting from my child's accident, illness, injury and/or incapacity, in any, whether or not I expressly authorized such expense.

I attest that my minor child is physically fit and sufficiently trained to participate in competitive swimming.

As the parent of the minor child(ren) listed below, I shall be personally responsible for and liable for the actions and conduct of my child and for any damage or injury he or she may cause while participating in the activities of the Swim Club.

If my child is in need of emergency medical treatment, I authorize the coaches, lifeguards, and/or a responsible adult to seek immediate attention for my child by calling the appropriate emergency services. I also understand that they will make every effort to contact the parent and/or legal guardian at that time.

Swimmer's Name: _____ Allergies: _____
List medical conditions/considerations: _____ GROUP: _____
Medications taken regularly: _____

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List medical conditions/considerations: _____ GROUP: _____
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During Swim Club Practice times and events list contact where you or a designated contact can be reached.

Emergency Contact Name: _____ Address: _____

Phone #: _____ Cell #: _____

Medical Insurance Provider: _____ Policy#: _____

Group #: _____ Name of Insured: _____

I hereby execute this release and indemnities as parent/guardian of the child, having fully read understand, and freely and voluntarily agree to its terms and conditions. I understand that this information will be kept confidential and only used incase of emergency.

Parent's/Guardian's Name (printed): _____

Parent's/Guardian's Signature: _____ Date: _____

PARENT VOLUNTEER FORM – 1 per family

Please check at least one volunteer event below in addition to the ESCL championship:

- Gator-A-Thon – fundraising event
- Booster Club – Celebrate coaches’ birthdays, plan & setup outside social activities for swim groups such as movie nights & holiday parties
- Spring Banquet – plan, set-up, decorations, clean-up
- Hotel travel planning – set-up reservations for out of town meets with group rates – applicable to traveling groups only
- ECSL Spring Championship at ECU Minges Pool – all participating swimmer’s families need to provide volunteer time and/or food donations to make the league championship a success – this is a great opportunity for the team to raise funds through food and heat sheet ad sales.

This form will be given directly to our volunteer chairperson. In order for our committees to contact you for volunteering, please AGAIN list your preferred contact numbers and e-mail addresses:

Email(s): _____Mother/Guardian

_____Father/Guardian

Phone #(s): _____Mother/Guardian

_____Father/Guardian

Photo/Roster Release Forms

2009-2010 Swim Year

I hereby:

- give
 do not give

Greenville Swim Club permission to take photographs of the minor(s) named below or use photographs in which the minor(s) may be involved with others for the purpose of promoting Greenville Swim Club or USA Swimming.

I hereby release and discharge Greenville Swim Club, from any and all claims arising out of use of the photos.

I also give permission for my name and address to be published on a roster that will only be used internally within the club for contact purposes and will not be released in any way to the public or an outside organization without my written permission.

Minor(s) - please list all swimmers' names below:

I, _____ am of full age,
[Guardian's name – Please Print]
and am able to contract for the minor(s) in the above regard. I have read the foregoing document and fully understand its contents.

Signature: _____

Date: _____

Print name: _____