

**ATHLETE INFORMATION**

**Swimmer's Information:**

/ /				
Last Name	First Name	Middle Name	Preferred Name	Birth date
<b>M or F    K 1 2 3 4 5 6 7 8 FR SO JR SR</b>				
Age	Gender	Grade in school (circle one)	Athlete E-mail	
<b>Crown Point Swim Club</b>		<b>Red   White   Black   Gold   Senior (circle one)</b>		
Team	Workout Group			

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*Communication with parents regarding club activities is very important. Please complete all contact information below and notify the*

*Head Coach with any updates to the information throughout the season to assure you receive timely updates. Thank you.*

*Please circle the contact information below you do not want published in club roster.*

**PRIMARY CONTACT INFORMATION**

**Mailing Info**

Last Name	Father's Name	Mother's Name
Mailing Address		
City	State	Zip

Mail to (if different then above)

**Contact Info**

( ) - ( ) -
Home Phone                      Fax

**Father's Information:**

( ) - ( ) -
Office Phone                      Cell Phone                      E-mail

**Mother's Information:**

( ) - ( ) -
Office Phone                      Cell Phone                      E-mail

Check box if no internet access

Check box if no internet access

**\*\* Please make sure to include any e-mail you have access that you can check. Much information is sent out via e-mail since that is the easiest way to distribute information to many quickly and on short notice.**

**SECONDARY CONTACT INFORMATION**

\_\_\_\_\_  
 Last Name                                      Father's Name                                      Mother's Name

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

\_\_\_\_\_  
 City                                      State                                      Zip

**Contact Info**

\_\_\_\_\_  
 (    )    -                      (    )    -  
 Home Phone                      Fax

**Father's Information:**

\_\_\_\_\_  
 (    )    -                      (    )    -  
 Office Phone                      Cell Phone                      E-mail

Check box if no internet access

**Mother's Information:**

\_\_\_\_\_  
 (    )    -                      (    )    -  
 Office Phone                      Cell Phone                      E-mail

Check box if no internet access

**MEDICAL INFORMATION**

Doctor's Name \_\_\_\_\_

Doctor's Phone (    )    - \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Emergency Contact Phone (    )    - \_\_\_\_\_

Medical Conditions \_\_\_\_\_

Medication \_\_\_\_\_

In case of separation please indicate with whom the child/children reside: FATHER (    ) MOTHER (    )  
 Phone information and mailings should be directed to: BOTH (    ) FATHER (    ) MOTHER (    )

**Swim Team Fees**

<i>TEAM</i>	<b>1st Swimmer</b>	<b>2nd Swimmer</b>	<b>3rd Swimmer</b>
Red Group	\$225.00	\$200.00	\$175.00
White Group	\$275.00	\$250.00	\$225.00
Black Group	\$325.00	\$300.00	\$275.00
Gold Group	\$350.00	\$325.00	\$300.00
Senior Group (Non-HS)	\$350.00	\$325.00	\$300.00
Senior Group	\$125.00	\$125.00	\$125.00
Pre team	\$40.00	\$40.00	\$40.00

SWIM TEAM FEES: \_\_\_\_\_ \$

MEET ESCROW FEES: R=\$35 / W=\$55 / B-G-NHS=\$75 / S= \$ \_\_\_\_\_

USA SWIM FEES: # of swimmers x \$53.00 \_\_\_\_\_ \$

TRANSFER FEES (if applicable) with surcharge of \$1.50 \_\_\_\_\_ \$

PARTICIPATION FEE: (\$200 per family) \_\_\_\_\_ \$

PAST FEES DUE (if applicable): \_\_\_\_\_ \$

FUNDRAISER: \_\_\_\_\_ \$

ADMIN FEE (\$15 for first child and \$8 for each additional) \_\_\_\_\_ \$

TOTAL AMOUNT DUE: \_\_\_\_\_ \$

AMOUNT PAID AT REGISTRATION \_\_\_\_\_ \$

----->CHECK # \_\_\_\_\_

AMOUNT APPLIED TO PAYMENT PROGRAM \_\_\_\_\_ \$

*Crown Point Swim Club*  
**Terms and Conditions For Participation**  
**Winter Season 2010**

1. USA Swimming-Indiana registration fees are due in full at registration and are non-refundable. This fee must be paid prior to your swimmer(s) entering the water.
2. When a swimmer is moved from one group to another, he/she must pay the monthly training fee for the highest group in which he/she participates. **ALL FEES FROM THE PREVIOUS SEASON MUST BE PAID IN FULL PRIOR TO SIGN-UPS FOR THE NEXT SEASON.**
3. Training fees are due and payable in full on the ***FIRST DAY OF PRACTICE FOR THE SEASON (Sept 14, 2009)***; However, Training fees may be paid in **TWO INSTALLMENTS** such that **ALL TRAINING FEES ARE PAID BY DEC 18, 2009.** A Minimum of down payment of one-half of the Total Program fee for the current Season is required at registration. **THE FINAL INSTALLMENT IS DUE DEC 18, 2009. IN THE EVENT THAT ALL TRAINING FEES ARE NOT PAID A NO SWIM POLICY WITH BE ENFORCED EFFECTIVE DEC 26, 2009.** Special payment arrangements may be made in advance for families with multiple swimmers or special finance circumstances.
4. Meet entry fees in addition to the training fees are estimated and collected at registration and placed in an escrow account. The Head Coach will select and register meet events for all swimmers. Swimmers will not be registered for meet events without sufficient funds in the account. Refunds cannot be made to accounts after team registration is processed. Relays are billed to families separately after they occur.
5. The Club hosts various meets and events throughout the season. All Age Group families are required to accept and abide by the Participation Policy of the Club (as amended from time-to-time). Failure to comply with the Participation Policy will result in the forfeiture of the Participation Deposit.
6. Any checks returned to the Club for non-payment will be **subject to a \$50.00 handling fee.**
7. As parents and/or guardians, you are expected to abide by the current "Guidelines for Parents Attending Swim Practices." Failure to comply with the guidelines may result in suspension of attendance by parents and guardians in the pool area.
8. You are committing to join the Crown Point Swim Club (THE "CLUB") for one full season (Sept 14, 2009 until midnight the day before sign ups for the Summer Season). Should a Swimmer decide to **DISCONTINUE PARTICIPATION IN THE CLUB, THE UNUSED PORTION OF THE TRAINING FEES ARE NON-REFUNDABLE AND ANY OUTSTANDING BALANCES OWED TO THE CLUB ARE CONSIDERED AN OBLIGATION OWED TO CPSC AND ARE PAYABLE ON TERMINATION OF PARTICIPATION.** The Team fees cover the salaries and meet travel of the coaches as well as many other items. Because we must commit to our Coaches for the entire season, it is expected that swimmers also commit to the entire season of fees, whether or not they are able to swim during all weeks or months of the season. Payment is expected in full unless a release from payment has been granted by the board, CPSC cannot release a swimmer from payment of USA Swimming fees or meet entry fees since these are fees that the club must pay to other organizations. Release of Season Team fees will be considered only upon written request of the board and are only intended for extraordinary circumstances beyond the control of the swimmer and parents **EXCEPT** for during the two week trial period for new swimmers.
9. One or two Fundraisers are required this season. Fundraisers help limit increases in swim fees.
10. **ALL FAMILIES are required to work a minimum of eight sessions over the course of the season. The \$200 check will be returned after all parent participation requirements have been fulfilled. HOWEVER, CPSC RESERVES THE RIGHT TO USE THIS CHECK AS PAYMENT TO SATISFY ANY OUTSTANDING FEES AT THE END OF THE SEASON.**
11. FAILURE TO COMPLY WITH THE TERMS OF THE CONTRACT WILL BE SUBJECT TO THE PENALTIES AVAILABLE TO THE CLUB BY LAW.

**I understand and agree to the Terms and Conditions contained above, in exchange for the privilege of my swimmer's participation in the activities and swimming program of the Crown Point Swim Club, Inc.**

\_\_\_\_\_  
Signature of Parent of Guardian

\_\_\_\_\_  
Date

**Emergency Medical Assistance**  
**Parents Consent / Liability Release**

In the event of injury to any of the children identified on page 1, I hereby give my consent for Crown Point Swim Club, Inc. (the "Club") personnel to provide the injured child with emergency medical assistance or treatment and agree to be financially responsible for the cost of such assistance or treatment.

I hereby give consent for the above-mentioned injured child to participate as a member of the Club during the current season and assume all risks incidental to such participation. I do further hereby waive, release, absolve, indemnify and agree to hold harmless the Club, its officers, directors, employees and their representatives and successors, from any liability of claims arising from any injury to any such child.

At times, the Club may take photographs of swimmers during the course of the season for the purpose of publishing them in local newspapers, on the Internet or other forms of media for the purpose of promoting the Club. By signing this form and not checking the space below, I give the Club permission to use my child's / children's photographs for the reasons stated above.

[        ] I do not want my child's picture published in any form of media.

\_\_\_\_\_  
*Signature of Parent of Guardian*

\_\_\_\_\_  
*Date*

**Crown Point Swim Club**  
 Registration Fee Payment Program

In an effort to allow families to manage the financial commitment for their swimmer(s), the Crown Point Swim Club allows registration fees to be paid in four installments. Registration fee payments will be remitted according to the payment schedule below:

Payment #	Payment Due Date	Amount Due <small>(To Be Completed By Treasurer)</small>
Payment 1	At Registration	
Payment 2	December 18, 2009	

Envelopes containing fee payments should be placed in the black lock box on the information cart located near the swimming pool by deadlines listed above. Should you have any questions regarding registration fee payments, contact the club's treasurer Mike Artim at 662-8281.

By signing below I acknowledge that I am electing to participate in the registration fee payment program and that I am liable for the amounts listed above. I agree that all payments will be remitted to the Crown Point Swim Club in a timely manner and understand that delinquent payments will result in loss of swimming privileges.

Swimmer Information

Swimmer Name: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Club Use

Approved By: \_\_\_\_\_