



# DIVE IN!

**2018-2019 Speed Demons Swim Team**





# 2018-2019 Fulton Speed Demons Registration

Participant Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
 School Attending: \_\_\_\_\_

**Your child MUST be able to swim unassisted in order to participate**

Mother: \_\_\_\_\_ Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Father: \_\_\_\_\_ Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

If Parent/Guardian cannot be reached the emergency contact will be called  
 Emergency Contact 1: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Emergency Contact 2: \_\_\_\_\_ Phone: \_\_\_\_\_

These individuals are also allowed to pick up my child from practice/meets  
 Name: \_\_\_\_\_ Name: \_\_\_\_\_  
 Name: \_\_\_\_\_ Name: \_\_\_\_\_

This is my \_\_\_\_\_ year on the team, my favorite event is \_\_\_\_\_  
 Senior Swimmers: I would like to help with junior practice Yes No

The Aquatics Coordinator and Coaches must have knowledge of any information pertaining to health, medications, restrictions, etc. (Please list) \_\_\_\_\_

**\*Prices include swimsuit, price reflects the cost difference between a male/female suit.**

## **Senior Swimmers 11 & up**

### **Fulton Y Member**

- Male \$360.00
- Female \$375.00

### **Non-member**

- Male \$405.00
- Female \$420.00

**\* Multi-Swimmer Discount: \$25**

### **Please select one:**

- I am paying in full
- 5 Month Automatic Drafted Payment Plan

## **Junior Swimmers 10 & under**

### **Fulton Y Member**

- Male \$335.00
- Female \$350.00

### **Non-member**

- Male \$385.00
- Female \$400.00

**\* Multi-Swimmer Discount: \$25**

### **Team Swimsuit (For additional suits)**

- Male \$37.95
- Female \$53.95

## **Parent/Guardian Permission**

I grant permission for any pictures taken of my child while in the Speed Demons program to be used for promotional purposes, such as the YMCA Website, newspaper, etc. (Please circle) **YES NO**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Fulton Family YMCA 715 W. Broadway Fulton, NY 13069 Phone: 315-598-9622 www.fultonfamilyymca.org

Staff Initial: \_\_\_\_\_ Date submitted: \_\_\_\_\_



## Speed Demons Code of Conduct

The purpose of the Fulton Family YMCA Speed Demons Swim Team is to provide a meaningful experience and opportunity for recreational and competitive swimmers. The YMCA core values of CARING, HONESTY, RESPECT and RESPONSIBILITY guide the swim team to ensure an atmosphere of safety and belonging for all participants.

### **CARING**

- I will be supportive of my teammates
- I will do my best to be a role model to younger swimmers
- I will celebrate my teammates success and encourage others

### **HONESTY**

- I will tell the truth
- I will own up to and apologize for my mistakes

### **RESPECT**

- I will demonstrate good sportsmanship at all times
- All cheering will be positive
- I will be respectful of teammates, competitors, officials, coaches and parents
- I will treat facilities and equipment with respect
- I will use respectful language and refrain from abusive or profane language
- Win or lose, I will show good sportsmanship

### **RESPONSIBILITY**

- I will take responsibility for my own actions
- I will help with set up, clean up and putting equipment away
- I will volunteer as much as my schedule permits
- I will take responsibility for my swimming performance and recognize that my efforts in practice lead to my results in meets
- I will base my success on my own performance, not by comparing it to others
- I will do my very best to be at each meet and ready to swim
- I will model ALL YMCA core values
- I will represent the YMCA and the team in a manner for which we can all be proud

I have read and understand the Fulton Family YMCA Speed Demon Code of Conduct. I agree to abide by the expectations described above and understand that I will receive disciplinary action that may include being removed from the Speed Demon Swim Team.

Swimmer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## VOLUNTEER SIGN-UP

This year each family will be asked to volunteer 5 hours to the Speed Demon Parent Board. Please choose from the following list and the Chairperson of that committee will contact you with details.

Parents Name \_\_\_\_\_

Swimmers Name \_\_\_\_\_

Email \_\_\_\_\_

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

**FUNDRAISING**

**CONCESSIONS**

**TIMING**

**BANQUET**

**PICTURE DAY**

**CHRISTMAS PARTY**

**OFFICIALS**

**SPLASH-A-THON**

**APPAREL**

**OTHER** \_\_\_\_\_



## Release and Waiver Liability/Indemnity Agreement

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA for any purpose, including but not limited to observation or use of facilities and equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and any personal representatives, heirs and next of kin, hereby acknowledges, agrees and represents that he or she has or immediately upon entering or participating will, inspect and carefully consider such premises and facilities of the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgment that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES AND EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH THE YMCA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE THE YMCA its directors, officers, employees and agents (hereinafter referred to as "releases") from all liability to the undersigned, his personal representatives, assigns, heirs and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releases or otherwise while the undersigned is in, upon or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releases or otherwise
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE due to negligence of release or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the forgoing release, waiver and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the State of New York and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

I HAVE READ AND UNDERSTAND THIS RELEASE

\_\_\_\_\_  
Signature of Applicant/Parent      Date

\_\_\_\_\_  
Signature of Applicant/Parent      Date

\_\_\_\_\_  
Name of Child      DOB

\_\_\_\_\_  
Name of Child      DOB

\_\_\_\_\_  
Name of Child      DOB

\_\_\_\_\_  
Name of Child      DOB

Staff-Print Applicants' names:



## Speed Demons Automatic Payment Agreement

Name \_\_\_\_\_ Date \_\_\_\_\_  
Child's Name \_\_\_\_\_

1. I understand that my account will be drafted once a month on the \_\_\_\_\_ of each month during the swim season starting in September with the last payment in January.
1. My monthly payment will be \_\_\_\_\_
2. A copy of the credit card/voided check being drafted is required to obtain the exact account number.
3. I have read the above, received a copy of this agreement and agree to the terms outlined.

### SIGNATURE AUTHORIZATION

I hereby give authority to the Fulton Family YMCA to charge the account listed above for my child/children's Speed Demons payments. It is my understanding that the monthly debits will be deducted on approximately the date I specified of each month and it will continue until January. **Should any preauthorized charge not be honored by the credit card company, then it is understood that payment is to be made to the YMCA in person in the amount of said debit plus a \$10.00 charge.** It is my understanding that the YMCA will notify me of any program rate increase thirty (30) days prior to taking effect.

Signature of person authorized on account \_\_\_\_\_

### Credit Card Information

American Express \_\_\_\_\_ Discover \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_  
Account# \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### Checking Account Information

Name of Bank \_\_\_\_\_ Route & Transit # \_\_\_\_\_  
Account# \_\_\_\_\_

**\*Initial \_\_\_\_\_ Payments must be current to participate in practices and meets.**



## Dry Land Training

### Access to the Fulton Family YMCA Fitness Center!

- Ages 14 & up may use all equipment (does not need orientation, but is recommended)
- Ages 11-13 may use cardio and hoist equipment after completing an Orientation. Please call or stop by to sign up (see below).
- Ages 8-10 who have a Family Membership at the Fulton YMCA may use cardio equipment during designated times (see below) with their parent/guardian who is also a member.

**PLEASE NOTE:** If you do not have a Family Membership at the Fulton YMCA 8-10 year olds will not be able to use the fitness center, they can use the pool and basketball court. If you would like to sign up for a Family Membership please see our front desk.

#### Fitness Center Hours Available for Ages 8-10

Friday 4:30pm-7:30pm  
Saturday 9:00am-12:00pm  
Sunday 9:00am-12:00pm

- Ages 10 and up may attend **ANY** YMCA fitness class!  
Schedules are available at our front desk.

\* A Fulton Family YMCA Speed Demons Membership gives you access to the Fulton Family YMCA ONLY.

\* If you choose to upgrade to a Fulton Family YMCA Membership we will waive the \$25.00 join fee. Family Membership will also give you access to all YMCA's under Nationwide Membership.

\*If the pool is closed for a meet. Swimmers are welcome to take classes or use open gym time. We will may also schedule time in the Fulton YMCA pool if the schedule allows. **Please see above for age/membership status requirements.**

**Please remove from packet**