

Clarington Swim Club Registration 11/12

Swimmer's Name _____ Date of Birth _____

(month/day/yr)

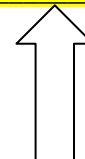
Address: _____

Postal Code: _____

Home Phone: _____ EMAIL _____

Mother's Name: _____ Work Phone: _____

Father's Name: _____ Work Phone: _____



Important for Club communications

How did you hear about the club? _____

Swim Fundamentals

Ages 3-6+

Enter start date: _____ (pick classes from available schedule)

Session Programs

Novice

Ages 12 & under

Youth Fitness

Ages 13 & over

Masters

Ages 20 & over

Waterpolo

Ages 13 and over

Select your Session(s)

_____ Session 1 – 6 weeks – Sept 19 to Oct 28

_____ Session 2 – 6 weeks – Oct 31 to Dec 9

_____ Session 3 – 8 weeks - Jan 3 to Feb 24

_____ Session 4 – 8 weeks – Feb 27 to Apr 20

_____ Session 5 – 8 weeks – Apr 23 – Jun 14

_____ Session 6 – 6 weeks – Jun 12 – July 19

Full year programs – September 19, 2011 through July 21, 2012

Full year Master (Adult)

Ages 20+, 1 fundraiser commitment

Full year Waterpolo

Ages 13+, 1 fundraiser commitment, 1 swim meet commitment

Competitive Swimming

ages 6-20, 2 fundraiser commitments, 2 swim meet commitments

Rookie

1st year competitive

Junior

12 & under

Senior

13 & over

University/Alumni

returning ROC swimmers

Full year programs - Select Fundraising Commitment

1 required for full year Masters and Waterpolo

2 required for full year competitive swimmer

I agree to help with the organization and running of these ROC fundraisers:

_____ Saturday, October 22 – Bottle Drive

_____ Saturday, October 29 – Social

_____ Saturday, TBA – Yuk Yuks

_____ Saturday, April 14 – Bottle Drive

\$100 buyout option available per fundraiser. Failure to meet the commitment registered here will result in the buyout fee being automatically applied to your account.

Name _____ Date _____

Competitive programs – Select Swim Meet Commitment

1 required for full year Waterpolo

2 required for full year competitive swimmer

I agree to help with the organization, running and/or officiating of these ROC hosted swim meets:

_____ Saturday, December 3

_____ Saturday, January 7

_____ Saturday, May 5

\$50 buyout option available per swim meet. Failure to meet the commitment registered here will result in the buyout fee being automatically applied to your account.

Name _____ Date _____

Athlete Medical Information:

Health Card Number _____ Doctor’s Name _____ Phone _____

Please Note Any Health Concerns: _____

Warning: There is a potential risk for injury involved in training and participating in swimming. The Clarington Swim Club has tried to create a safe and controlled environment for safe participation. Coaches and officials have established rules for participation and conduct on and about the pool that should be followed. I, _____ (Parent/Guardian if swimmer is under 18) have read the above warning and agree to the fee structure and club commitments of the Clarington Swim Club for the 2010/2011 season.

Signature: _____ Date: _____

Please note that registration and membership fees are Non-refundable.