



I-70 TSUNAMIS

Winter/Spring Season 2020. January 14th—April 30th

Parents First & Last Name _____

Swimmer's First & Last Name _____

Swimmer's DOB: _____

Mailing Address _____

Phone Number _____ Email _____

Emergency Contact Name & Number: _____

Please contact me via: Email Text Message Both

Child MUST be able to swim

Competitions will be according to age groups

Practices: Tuesdays & Thursdays 5:00 p.m. to 6:30 p.m.

(no practice during Spring Break)

Swim meets are scheduled for Saturdays or Sundays

Proud participant of Colorado Association Recreational Athletics Program (C.A.R.A.)

3 equal payments: \$65.00

Complete session: \$195.00

Registration is for the season as a whole. There will be no partial payments for missed days of the season and no credit or refunds given for early cancelation.

Have a questions or comments? Please contact BPRD at 303-644-5040

Coach: Chrissy Weatherly

Director: Leila Schaub

Office Use Only

Employee ID _____ Receipt # _____ Date _____ Season: Fall _____ Winter _____

Volunteer Discount _____ Total Fee: \$ _____

Price break down

Discounts cannot be combined

1 child paid in full	\$195.00ea
3 equal payments	\$ 65.00ea

OR pick One of the below available discounts

Multiple Child Discount 5% off

2+ children paid in full	\$185.25ea
2+ children 3 equal payments	\$ 61.75ea

Parent Volunteer Discount 20% off (Must volunteer 4 hours per 15 week session)

1 child paid in full	\$156.00ea
1 child 3 equal payments	\$ 52.00ea

MEMBERSHIP DISCOUNT PRICING

Cannot be combined with multi child or volunteer discount. Discount is only valid if the child that is being enrolled is on the membership. No membership discount is available for basic members.

	Classic (10% off)	Deluxe (15% off)
1 child paid in full	\$185.50ea	\$165.75ea
1 child 3 equal payments	\$ 58.50ea	\$ 55.25ea

Payment Option Agreement

By opting to pay for my child/children swim team in 3 equal payment I agree to the below terms and conditions:

- The first payment will be due upon registration or the first day of swim practice (January 14th as scheduled) and will not be accepted any later. There is no option to pay after your child/children have started on the team.
- The second payment will be due **no later than** March 1st and April 1st.
- Failure to pay the agreed amount of \$_____ by the above due dates will result in your child/children being removed from the program.
- There will be no discount, credit, or refund given if your child/children does not complete the season. By signing your child up for this season of swim team you agree to their full participation and accept that there will be no reimbursement if you chose to end the season early or miss it in part.

Parent/Guardian Name _____ Signature _____ Date _____

Youth Code of Conduct

Preamble

The essential elements of character building and ethics in sports participation are embodied in the concept of sportsmanship and six core principles: trustworthiness, respect, responsibility, fairness, caring and good citizenship. The highest potential of sports is achieved when competition reflects these “six pillars of character”.

I therefore agree:

1. I will remember that children participate in sports to have fun and that the game is for the youth, not the adults.
2. I will inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
3. I will learn the rules of the game and the policies of the league.
4. I (and my guests) will be a positive role model for my child and encourage sportsmanship by showing respect and courtesy, by demonstrating positive support for all players, coaches, officials and spectators at every game, practice and other sporting event.
5. I (and my guests) will not engage in any kind of unsportsmanlike conduct with any official, coach, player or parent such as booing and taunting, refusing to shake hands, or using profane language or gestures.
6. I will not encourage any behaviors or practices that would endanger the health and wellbeing of the athletes.
7. I will teach my child to play by the rules and to resolve conflicts without resorting to hostility or violence.
8. I will demand that my child treat other players, coaches, officials and spectators with respect; regardless of race, creed, color, sex or ability.
9. I will praise my child for competing fairly, executing the required skills and trying hard to improve.
10. I will emphasize skill development and individual effort over winning.
11. I will cultivate age appropriate expectations for my child and his/her teammates.
12. I will promote the emotional and physical well-being of the athletes ahead of any personal desire I may have for my child to win.
13. I will respect the officials and their authority during games and will never question, discuss, or confront coaches at the game field; I will take time to speak with coaches at an agreed upon time and place.
14. I will demand a sports environment for my child that is free from illegal drugs, tobacco, alcohol and vulgar language, and I will refrain from their use at all sports events.
15. I will refrain from coaching my child or other players during games and practices, unless I am one of the official coaches of the team.

I also agree that if I fail to abide by the aforementioned rules and guidelines, I will be subject to disciplinary action that could include, but is not limited to the following:

- Verbal warning by official, head coach and/or head of league organization
- Parental game suspension; written documentation of incident kept on file by BPRD; child suspension will result if parent is suspended
- Parental season suspension
- Referral to legal authorities

Bennett Park and recreation District Assumption of Risk Waiver

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities and I voluntarily agree to assume full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participation in these programs/activities against the Bennett Park and Recreation District (BPRD) including its officials, agents, volunteers and employees. I do hereby fully release and forever discharge the BPRD from any and all claims for injuries, damages, or activities. I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. I agree to assume all fiscal responsibility for medical rescue or other expenses that I may incur as a result of participating in these programs/activities I acknowledge that failure on my part, whether direct or indirect, to comply with the requirements and acknowledgments of the programs/activities, shall result in the revocation of my right to participate these programs/activities.

Participation will be denied if the name and signature of the participant’s parents and/or legal guardian is not on the line below.

Parent/Guardian Name _____ Signature _____ Date _____

Swim Team Waiver- 2020

Swimming under this waiver releases Bennett Park and Recreation District, employees, volunteers, and the Board of Directors, from any responsibility in the event of any injury incurred while swimming when lifeguard services are/are not provided.

Swimming under this waiver is also subject to all conditions as described in the posted pool rules & regulations. By signing this waiver, I have read, fully understand, and am responsible for complying with the pool rules, regulations, and schedule.

Please initial next to each statement acknowledging you have read them and will abide by the rules:

____ I understand that swim team practice is strictly for that use-practice.

____ I understand that there may not be a lifeguard on duty during the time I will be swimming.

____ I understand that I must sign in and out for record keeping purposes.

____ I understand that if I am under the age of 18 I should not be in the pool alone or unsupervised at any time.

____ I understand that no swimming will take place unless a current waiver is on file.

____ I agree to assume all fiscal responsibility for medical rescue or other expenses that I may incur as a result of participating in swim team.

____ I acknowledge that failure on my part, whether direct or indirect, to comply with these requirements and acknowledgments, shall result in the revocation of my right to use the pool for swim team or other recreational purposes.

Swimmer's Name _____

Parent/Guardian Name _____

Signature _____ Date _____