

# Chehalem Swim Team



Membership Packet 2009-2010

Chehalem Valley Aquatic Club  
 Chehalem Swim Team  
 Monthly Fee Schedule 2009-2010

<b>Training Group</b>	<b>Full Time</b>	<b>Half Time ( &lt; 3 days per week)</b>	<b>Non - Fundraising Option</b>
<b>Senior</b>	1st Family Member \$125.00 2nd Family Member \$104.00	\$75.00 upon completion of half-time form	\$38.00 *Per month fee \$420 *annually
<b>Mako Shark</b>	1st Family Member \$100.00 2nd Family Member \$83.00	\$60.00 upon completion of half-time form	\$38.00 *Per month fee \$420 *annually
<b>Bull Shark</b>	1st Family Member \$76.00 2nd Family Member \$63.00	\$45.00 upon completion of half-time form	\$38.00 *Per month fee \$420 *annually
<b>Thresher Shark</b>	1st Family Member \$65.00 2nd Family Member \$55.00	\$39.00 upon completion of half-time form	\$38.00 *Per month fee \$420 *annually
<b>Hammer Head Shark</b>	1st Family Member \$59.00 2nd Family Member \$50.00	\$29.00 upon completion of half-time form	\$38.00 *Per month fee \$420 *annually
<b>High School</b>	\$30.00	November 15 through February 15	
<b>Sub-Total</b>	\$	\$	\$

Sub-Total \$ \_\_\_\_\_

Team Registration (Due annually at registration) \$ 120.00

Total Due \$ \_\_\_\_\_

# Chehalem Valley Aquatics Club

Chehalem Swim Team Registration: Short Course / Short Course 2009-2010

P.O. Box 1173 Newberg, Oregon 97132

## Swimmer #1:

Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Preferred First Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Swim Suit Size: \_\_\_\_\_ School: \_\_\_\_\_

Team Assignment: \_\_\_\_\_ (for office use only)

## Swimmer #2:

Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Preferred First Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Swim Suit Size: \_\_\_\_\_ School: \_\_\_\_\_

Team Assignment: \_\_\_\_\_ (for office use only)

## Swimmer #3:

Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Preferred First Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Swim Suit Size: \_\_\_\_\_ School: \_\_\_\_\_

Team Assignment: \_\_\_\_\_ (for office use only)

## Swimmer #4:

Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Preferred First Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Swim Suit Size: \_\_\_\_\_ School: \_\_\_\_\_

Team Assignment: \_\_\_\_\_ (for office use only)



**Billing Information:**

Send Correspondence To: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: (Please Print) \_\_\_\_\_ Phone: \_\_\_\_\_

**Parent / Guardian #1:**

Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Employer: \_\_\_\_\_ City: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: (Please Print) \_\_\_\_\_

**Parent / Guardian #2:**

Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Employer: \_\_\_\_\_ City: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: (Please Print) \_\_\_\_\_

**Authorization:**

I hereby give consent for any child (ren) to participate with the Chehalem Swim Team. In consideration of being permitted to participate as a member of the Chehalem Swim Team, I hereby release, discharge, and agree to hold harmless the Chehalem Swim Team and it's coaches, members of the Board of Directors, it's volunteers, it's agents and its employees, together with its successors and assigns, from any and all liability for injuries to property or person suffered as a result of participation as a member of the Chehalem Swim Team. I give the club authorization to apply or United States Swimming membership (s) for my child (ren).

I agree to and will sign and return with the Chehalem Swim Team Registration packet the following documents: "Medical Release" (one per swimmer), "Terms and Conditions of Participation", "Honor Code" (one per swimmer), "Fundraising Contract", and "Swim Meet Contract".

I also acknowledge that I have read and understand the "2009-2010" fee structure and meet entry policies.

I understand that by signing the required forms for membership with the Chehalem Swim Team I enter into a legally binding contract and are held responsible for all fees/responsibilities incurred.

Signature of Parent or Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Parent or Legal Guardian: \_\_\_\_\_

# Chehalem Valley Aquatics Club

Chehalem Swim Team Member Medical Information and Consent Form 2009-2010

## Swimmer Information:

Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Health Insurance: \_\_\_\_\_ I.D. #: \_\_\_\_\_

Group #: \_\_\_\_\_ Subscriber Name: \_\_\_\_\_

Does the swimmer have any known medical or allergy conditions?

\_\_\_\_\_

If yes, how do they manage condition?

\_\_\_\_\_

\_\_\_\_\_

Symptoms:

\_\_\_\_\_

\_\_\_\_\_

Current Medications:

\_\_\_\_\_

\_\_\_\_\_

Does the swimmer have any mental or physical limitations? If yes, please explain.

\_\_\_\_\_

\_\_\_\_\_

**The Chehalem Swim Teams coaching staff are Red Cross certified Lifeguards and are certified in First Aid and CPR for the Professional Rescuer. As a parent or legal guardian of the child listed, I hereby authorize the coaching staff of Chehalem Swim Team to summon emergency medical assistance for my child if one or more of them deem it appropriate.**

**I also hereby consent to any emergency medical or surgical treatment deemed advisable by any physician or surgeon on the staff of Providence Newberg Hospital or the nearest hospital; if I or the child's other legal parent/guardian cannot be located when the child is brought in to the hospital for treatment.**

**I absolve The Chehalem Swim Team and its coaching staff from all liability while acting on my behalf in this regard.**

Parent Signature \_\_\_\_\_ Date: \_\_\_\_\_

## TERMS AND CONDITIONS FOR PARTICIPATION

### **Chehalem Swim Team (A Not-For-Profit Corporation)**

1. The yearly club registration fee and United States Swimming (USS) registration fee are not refundable and must be paid prior to the swimmer entering the water. New swimmers to the Chehalem Swim Team may participate for a maximum of seven days prior to payment of the registration fees.
2. When a swimmer is moved from one group to another, he/she must pay the monthly fee for the highest group beginning on the next billing cycle.
3. MONTHLY DUES ARE TO BE PAID BY THE FIFTEENTH (15TH) DAY OF THE MONTH. NONPAYMENT OF MONTHLY DUES PAST THE DUE DATE, WHICH IS THE FIFTEENTH (15TH) DAY OF THE MONTH, WILL NECESSITATE NON-PARTICIPATION FOR THE SWIMMER(S) UNTIL PAYMENT IS MADE.
4. Meet entry fees are in addition to the monthly dues. Nonpayment of entry fees will also necessitate non-participation for the swimmer(s) until payment is made.
5. Should a swimmer decide to discontinue participation in the program with the Chehalem Swim Team, the monthly dues for the month of which he/she swims any portion thereof and any outstanding entry fees are considered an obligation to the Chehalem Swim Team, and are payable upon termination of participation.
6. EACH FAMILY IS REQUIRED TO SIGN AND RETURN THE SWIM MEET CONTRACT. FAILURE TO COMPLY WITH THE MEET CONTRACT WILL RESULT IN ADDITIONAL FINACIAL OBLIGATIONS AS OUTLINED IN THE MEET CONTRACT.
7. All swimmers, who are members of the Chehalem Swim Team, are required to participate at their highest level of achievement in championship meets (including relays).
8. Each family is responsible for an annual fund raising fee as outlined in the fundraising contract.
9. Each parent and swimmer is responsible for reading and understanding the contents of the "Chehalem Swim Team Handbook".
10. Each swimmer will be asked to sign a swimmer "Honor Code". Failure to comply with this code may result in the swimmer being asked to leave the team.
11. Any checks returned to the Chehalem Swim Team for Non-Sufficient Funds will be subject to a \$35.00 additional handling charge.
12. Families are expected to time at away meets.

I understand and agree to the above terms and conditions of the Chehalem Swim Team in exchange for the privilege of my child(ren), registered with this form, to participate in the activities and swimming program of the Chehalem Swim Team.

**(Signature of Parent or Guardian)** \_\_\_\_\_ **Date** \_\_\_\_\_

## SWIM MEET CONTRACT

As one of the families that will enjoy the benefits of belonging to the Chehalem Swim Team, the following facts concerning the financial significance of well-run swim meets are worthy of your recognition:

- I. The Chehalem Swim Team funds its activities from three main sources. The first source is the yearly registration and monthly dues you have agreed to pay. The second source is the hosting of two to three large swim meets each year and the third being our annual fundraisers. Generally, each meet will generate \$3,000 to \$6,000 in net revenue for the club.
- II. It takes 45 people to run EACH SESSION of every meet we host at the Chehalem Aquatic Center during the short course season!! The presence and participation of EACH ONE of these 45 people is ALL THAT ASSURES CONTINUANCE OF SUCCESSFUL RESULTS.
- III. The club membership has indicated a strong preference to the board for hosting swim meets versus alternative fund raising methods.
- IV. Chehalem has the reputation of hosting one of the best meets in the state of Oregon as well as some of the best meets in the whole country.

The following conditions are part of your agreement to be a member of the Chehalem Swim Team:

1. The board of directors will communicate with the membership the required number of sessions each family is to work for each meet.
2. EACH FAMILY WILL PROVIDE WORKERS TO SATISFY THE MEET SESSION REQUIREMENTS AS SET FORTH BY THE BOARD.
3. Every year the Chehalem Swim Team hosts at least two to three swim meets. This year meets are on the following weekends:
  - October 9-11, 2009 at the Chehalem Aquatic Center (Harvest Open)
  - November TBA, 2009 at the Chehalem Aquatic Center (Special Olympics)
  - January 8-10, 2010 at the Chehalem Aquatic Center (Shark Chase Open)
  - February TBA, 2010 at the Chehalem Aquatic Center (Masters)
  - March 13-14, 2010 at the Chehalem Aquatic Center (Tall Timbers Champs)
4. If a family cannot attend any one of the above meets, IT IS THEIR RESPONSIBILITY TO MAKE ARRANGEMENTS AHEAD OF TIME WITH THE MEET DIRECTOR TO HELP WITH A JOB PRIOR TO OR AFTER THE CONCLUSION OF THE ACTUAL MEET.
5. At each meet there will be a registration table for you to "sign in" when you arrive at the pool. It is your responsibility to make sure that you have signed in properly.
6. Failure to satisfy the requirements spelled out above in conditions # 2 and # 4 it will result in a twenty-five dollar (\$25.00) assessment per session not worked for that family for each meet.
7. After you have paid the assessment, you will be allowed to "make-up" your missed sessions at the next meet of the current year and have your money returned. (A year is defined as meets held between September 1 through the following August 31).

Signature of Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

## FUND-RAISING CONTRACT

There is a fund raising obligation as outlined below per Chehalem Swim Team family. This obligation will encourage each Chehalem Swim Team family to participate in Chehalem Swim Team fund raising efforts of their choice. CST's fundraising program accounts for twenty five percent (25%) of CST's budget.

The following conditions are part of your agreement to be a member of the Chehalem Swim Team:

1. An assessment of fundraising requirements per Chehalem Swim Team family is outlined in the table below. Fundraising will be charged to your fund raising account at the rate listed below per athlete each month starting in October 2009.

Family Requirement	Annual Requirement \$420.00 Monthly Dues \$38.00
--------------------	---

2. Credits up to the required dollar amount per family will be issued to your fund raising account under the following conditions:
  - I. Swim-A-Thon: Held on November 14, 2009. Athletes gather pledges per lap or one lump sum to cover a maximum of 200 laps or 2 hours of swimming whichever comes first.
  - II. St. Paul Rodeo: Preparation for event begins in May and runs through June. The actual event will be held early July. Credit will be based on a "per job" basis for event preparation, or at \$10 per volunteer hour the day of the event.
  - III. Rummage Sale: Will take place in June. Monies raised through this fundraiser will be directly credited towards your fundraising account with the Chehalem Swim Team.
  - IV. Old Fashioned Festival: Will take place in July. Credit will be based on a "per job" basis for event preparation, or at \$10 per volunteer hour the day of the event.
  - V. Personal advertising in the heat sheets at any of the Chehalem Swim Team hosted home swim meets will result in a direct credit to your family's fund raising account less expenses such as graphic arts, etc... This credit will also apply to any company advertising in these heat sheets in which you directly bring to the attention of the Chehalem Swim Team Advertising Chairperson.
  - VI. Meet, event, or lane sponsorships in which you take an active participation in acquiring for the Chehalem Swim Team will result in a credit.
  - VII. General Chehalem Swim Team sponsored fund raising activities in which you participate will be credited to your account.

**Printed Name of Parent or Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Parent or Guardian:** \_\_\_\_\_ **Date** \_\_\_\_\_

## HONOR CODE

The following code is in effect throughout the year. Some of the items refer specifically to team travel. Additionally, anyone who, in the opinion of the coach or coaches, acts in a manner that would interfere with the travel objectives listed below, will be subject to immediate return home (at the expense of the parent and/or swimmer) and other punishments including barring from future travel meets or other competition or dismissal from the team.

The Chehalem Swim Team will seek out of town swimming competition for the following reasons:

- Different individual competitions.
- A higher quality of competition.
- Experience in trial/finals competition.
- Conditions conducive to exceptional performances.

CST may travel as a team to these meets and everyone is expected to behave in an exemplary manner. The reputation of CST, as well as the other athletes with you, is dependent on your behavior.

1. The coaching staff holds the final word on any rules, regulations, or disciplinary action.
2. The consumption or purchase of alcohol, smoking or chewing tobacco, or use of any other illegal drug or substance of any kind will not be allowed. In addition, any team member found or suspected to be in the presence of others (regardless of team affiliation) partaking in any of the above activities will be subject to the same punishments and probable expulsion from CST. Any swimmer suspected of such activity will appear before a review committee composed of the senior team coach, the head age group coach, the club president, and two other CST board members.
3. At no times will male and female athletes be in the same room together with the door closed. This applies to CST members or members of any other team.
4. No team meetings may be missed. Be punctual to all meetings and warm-up times.
5. No team member may be out of their room after the assigned bed time. Permission must be obtained from the coach to leave the room past this time.
6. Any damages or thievery incurred at a motel will be at the expense of the swimmers assigned to that room, and further disciplinary action will be taken. No loud or boisterous behavior will be tolerated in the hallways or public areas, and such behavior should be kept to a minimum in your rooms. Make all long distance calls on a credit card or collect.
7. All team members will be polite in restaurants. Leave a 15% tip. If there has been a problem with the service, see the coach.
8. Agree to follow the rules about practice and meet behavior in the team handbook.

I recognize my responsibility to abide by the rules and requirements of the Chehalem Swim Team. I am representing and I acknowledge that I have received and read the above documentation.

**Swimmer:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

**Parent/Legal Guardian:** \_\_\_\_\_ **Dated:** \_\_\_\_\_