

To provide aquatics programmes, for persons of all ages, that encourage physical fitness and wellness, build character and self-discipline, inspire camaraderie and promote civic mindedness and excellence.

#### **REGISTRATION PACKET**

Checkl	list:	
•	Signed Waiver/Release of Liability Form	
•	Signed Code of Conduct Form	
•	Completed Alpha Aquatics Registration Form	
٠	Completed *BAF Swimmer Registration Form (School of Strokes, Performance Groups, Collegiate)	
•	Colored Copy of first 4 pages of Passport	
•	Completed *BAF Transfer/Release Form (Signed by Former Swim Club's Coach)	
•	Completed *BAF Individual Membership Form (\$25.00 annually per member)	
٠	Completed Alpha Aquatics Committee Volunteer Form	
	Photo head shot of swimmer	
•	Reviewed Swim Gear List	
*Bahan	nas Aquatics Federation	

Alpha Aquatics Email address: <a href="mailto:Swim@alphaaquatics.co">Swim@alphaaquatics.co</a>



#### **OBJECTIVES & MISSION**

Established in 2012, Alpha Aquatics is a not for profit association incorporated under the Companies Act of The Bahamas.

The Mission of Alpha Aquatics is to "To provide aquatics programmes, for persons of all ages, that encourage physical fitness and wellness, build character and self-discipline, inspire camaraderie and promote civic mindedness and excellence."

As reflected in its mission, Alpha Aquatics' objectives are aimed at furthering the interest and education of all interested persons in physical fitness through aquatics, particularly the sport of swimming; providing quality instructions to swimmers of all levels; teaching the importance of sportsmanship, responsibility, integrity, and team work; instilling values of hard work, commitment, self-discipline, and perseverance; encouraging its members to achieve high standards of athletic excellence and overall wellness; offering wholesome recreational experiences; promoting social and emotional development; fostering peer and family cooperation and promoting community responsibility and volunteerism.

#### **EXECUTIVE COUNCIL & COACHES**

#### **EXECUTIVE COUNCIL:**

Celestial Darville President

Dunstan Charles Vice President

Doretha Knowles Treasurer Verneque Thompson Secretary

Zarina Fitzgerald Immediate Past President

Tonya Bastian Galanis Director Gina Bastian Wallace Director Clare Thompson Director

Theda Weech Bahamas Aquatics Federation Representative

#### **COACHING STAFF:**

Jorge Rodriguez Director of Coaching

David del Cueto Assistant Coach

Perez Moss Assistant Coach

Ariel Weech Assistant Coach



#### Alpha Aquatics - Waiver/Release of Liability

I, the undersigned member/ parent/guardian consent to/for my son/daughter/charge, a minor, to participate in the events, which are hereinafter referred to as the "activities" sponsored by the Alpha Aquatics. I consent to my/my minor's participation in the activities and acknowledge that the I/ my Minor Participant fully understand(s) that my/his/her participation may involve risk of serious injury, including losses which may result not only from my/my minor's own actions, inactions or negligence, but also from the actions, inactions, or negligence of others, the condition of the facilities, equipment, or areas where the event or activity is being conducted, and/or the rules of play of this type of event or activity. I understand that if I have any risk concerns, I should discuss the risks associated with my/my minor's participation with the activity coordinators and /or coaching staff, before I sign this document and before any activities begin.

In consideration of allowing me/Minor Participant to participate in the activities, I hereby release and hold harmless Alpha Aquatics, the coaches and members of its Executive Council, officers, employees, volunteers, other participants, and agents (collectively, the "Released Parties"), of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that I/Minor Participant may have or sustain with respect to any and all damage and/or injury, of any type, arising out of my/his or her participating in the activities. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

I understand that whilst the coach and/or assistant in charge of Alpha Aquatics will take all reasonable care of swimmers, they cannot be held responsible for any loss, damage or injury suffered by me/Minor Participant whilst travelling to or from, or taking part in any club activities.

In consideration of allowing me/Minor Participant to participate in any event hosted or sponsored by Alpha Aquatics, I /Minor Participant hereby release(s) and hold(s) harmless the Released Parties, of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that I/Minor Participant may have or sustain with respect to any and all damage and/or injury, of any type, arising from my/Minor Participant's participation in the activities. I / Minor Participant also agree(s) that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

I certify that I/Minor Participant am/is in good health and have/has no physical condition that would prevent participation in this activity. Furthermore, I/ Minor Participant agree(s) to use my/minor's personal medical insurance as a primary medical coverage payment if accident or injury occurs. I/ Minor Participant consent(s) to any emergency medical treatment that may become necessary during the course of any authorized club activity. I understand that, save for emergency treatment, in the case of any minor swimmer; it is the responsibility of the parent/guardian responsibility to ensure that any necessary medication relating to any medical condition is administered and that no club official is responsible for the administration of any drug/medication.

I/the undersigned parent/guardian further agrees to indemnify, save and hold harmless the Released Parties from any and all claims, demands, losses, damages and liabilities for indemnities, contribution or otherwise with respect to any damage and/or injury, of any type, arising from my/Minor Participant's participation in the activities. The undersigned also agrees that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the Releasee and is intended to be as broad and inclusive as is permitted by the laws of the jurisdiction in which the event(s) is/are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Name of Member / Minor Participant	Name of Parent/ Guardian	
Signature of		
Member/Parent/Guardian	Date:	



#### Code of Conduct & Disciplinary Policy

#### **Code of Conduct:**

Membership in Alpha Aquatics is a privilege. Every member is expected to demonstrate behavior that furthers the objective and mission of Alpha Aquatics.

#### Alpha Aquatics swimmers and other members shall at all times:

- (i) Be courteous and respectful to all individuals.
- (ii) Follow the directions and rules of the coaching staff.
- (iii) Refrain from the use of illegal drugs.
- (iv) Demonstrate team spirit, team work and camaraderie
- (v) Attend practices regularly and on time.
- (vi) Refrain from horseplay during practices or interference with other team members.
- (vii) Obey pool safety rules:
  - a. No diving except where permitted and in the manner permitted
  - b. No unruly or disruptive behavior such as pushing, shoving, shouting on deck or in the locker rooms
  - c. No towel snapping or hitting
  - d. No fighting
  - e. No verbal abuse or swearing (including name-calling)
- (viii) Respect the property of others.
- (ix) Comply with the requirements of the team, including, wearing of team uniform at all team events when directed by a member of the Coaching staff.

the Code of Conduct.	have read and understand the rules and guidelines outlined in the
the code of conduct.	
Signature	Date
Parent/ Guardian (Where member/swimmer is under the age of 1	2) Date

#### **Disciplinary Policy**

Team practice is a group activity and it is important that the coaches' time is not occupied with disruptive or insubordinate behavior. Behaviour that may result in disciplinary action include activities expressly forbidden in the Swimmer's Code of Conduct and generally includes disrespect to coaches, disrespect to teammates, disrespect to pool staff or officials, disrespect to parents, disruption of practice, or destruction of pool property. Infractions will result in disciplinary actions after an investigation and hearing by the Disciplinary Committee. Sanctions for breach of the disciplinary policy are as follows:

- 1. First Offence: A verbal reprimand and restorative action by the swimmer (i.e. apology, repair of damage, and/or suspension from that day's activity for the remainder of the day or an amount of time deemed appropriate by the Coach.
- 2. Second Offence: Suspension from the team and all club activities for 5 swim days from the time of the offence.
- 3. Third Offence: Suspension from the team and all club activities for 30 swim days from the time of the offence.
- 4. Fourth Offence: Suspension from the team and all club activities for the remainder of the season or for such period that the Board may determine. The swim season is usually defined as September 1 to July 1 of the following year.

The Disciplinary Committee may also recommend to the Executive Council the expulsion of a swimmer or other member from the Club. All incidents will be recorded and reviewed monthly, or as determined by the Disciplinary Committee of the Club.



#### **SWIM FEES**

	Water Safety	FUNdamentals	School of STROKES	Performance/ HIGH Performance	AquaFitness
Alpha Aquatics	\$350	\$350	\$350	\$350	\$350
BAF(annual paid 1 <sup>st</sup> term only)			\$25	\$25	

Please provide colored copy of 1<sup>st</sup> four (4) pages of swimmer's passport for submission to the Bahamas Aquatics Federation (BAF) along with completed Form

#### **PAYMENT DATES**

#### **Club Fees:**

September 1 – Fall Term December 1 – Winter Term March 1 – Spring Term

Special payment arrangements (postdated cheques) due to exigent circumstances may be approved by the Executive Council. Cheques should be made payable to Alpha Aquatics

**Meet Fees:** Meet Entry fees for local swim meets including Bahamas Aquatics Federation National Swimming Championships are the responsibility of parent/guardian/swimmer. These are non-refundable and are to be remitted prior to the meet on or before the date specified. Meet Entry Fees are variable depending upon the number of events a swimmer is entered in.



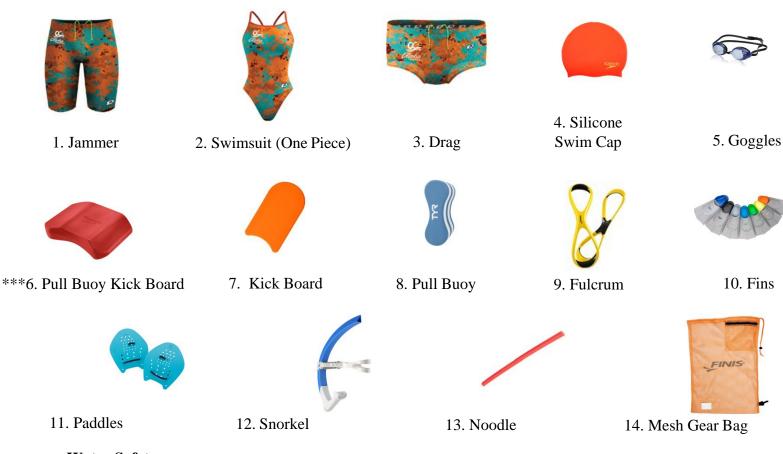
#### **COMMITTEES**

Alpha Aquatics relies on the support of its parents, guardians and family & friends to achieve its objectives.
Public Relations & Marketing
<ul> <li>Duties &amp; Responsibilities:</li> <li>To promote and publicize all aspects of the Club.</li> <li>To maintain the Club's Facebook page and other social media pages and upload/post Club newsletters and events, and positive accomplishments of the Club's swimmers.</li> <li>To respond to phone or email inquiries regarding the Club from prospective new members.</li> <li>To ensure that the Club and its sponsors receive the widest media coverage possible.</li> <li>To develop media releases.</li> </ul>
Meet/Technical Committee
<ul> <li>Duties &amp; Responsibilities:</li> <li>To book the venue and date for Club meets.</li> <li>To organize event schedules for the meets.</li> <li>To collect completed entry forms and fees from participating swim clubs.</li> <li>To organize officials to run the events.</li> <li>To complete the full program and arrange for printing.</li> <li>To create/procure awards.</li> <li>To organize concession stands, setting up and clean-up of site.</li> <li>To co-ordinate all of the above for the day of the meet.</li> <li>To collate results after the events and pass on to the Club's Secretary for forwarding to The BAF.</li> </ul> Fundraising Committee Duties & Responsibilities:
<ul> <li>To identify and target sources of funding for the Club in association with the Club's development plan.</li> <li>To establish and develop effective working relationships with key local funding providers.</li> <li>To promote and publicize any funding secured for the Club through Club newsletters, website, etc. in association with the Club's Public Relations &amp; Marketing Committee</li> </ul> Spirit, Hospitality and Outreach Committee
<ul> <li>Duties &amp; Responsibilities:</li> <li>To canvas opinion within the membership regarding social events.</li> <li>To organize pep rallies and Christmas and other socials for Club members.</li> <li>To liaise with the Treasurer to determine annual budget amounts for socials.</li> <li>To organize any other ad-hoc social events as agreed by the Club.</li> <li>To assist with planning bi-annual community based activities.</li> </ul>
Name of Member/Parent/Guardian/Family Member/Friend  Name of Swimmer ( If applicable)



#### **SWIM GEAR AND EQUIPMENT LIST** (Examples only)

**Swimoutlet.com** (Recommended Website)



#### **Water Safety**

Items #: 1 or 2, 4 (mandatory girls/optional boys), 5, 7, 13

#### **FUNdamentals**

Items #: 1 or 2, 4(mandatory girls/optional boys), 5, 7

#### **School of Strokes**

Items #: 1 or 2, 4 (mandatory girls/optional boys), 5, \*\*\*6 OR 7 & 8, 9, 10, 11, 12 & 14

#### **Performance/HIGH Performance**

Items #: 1 or 2, 3, 4 (mandatory girls/optional boys), 5, \*\*\*6 OR 7 & 8, 9, 10, 11, 12 & 14

\*\*\*Pull Buoy Kick board is a combination of the individual Pull Buoy and Kick Board. Purchase either pull buoy kick board only, OR pull buoy and kick board individually)

#### **LAND TRAINING:**

- Sneakers
- Shorts
- Alpha Aquatics T-Shirt

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# SWIM SCHEDULE 2019 - 2020



	UNIVERSITY OF THE BAHAMAS						
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY		
	Water Safety (3:45 - 4:15 PM)	Water Safety (3:45 - 4:15 PM)	Water Safety (3:45 - 4:15 PM)	Water Safety (3:45 - 4:15 PM)			
	FUNdamentals (4:15 - 4:45 PM)	FUNdamentals (4:15 - 4:45 PM)	FUNdamentals (4:15 - 4:45 PM)	FUNdamentals (4:15 - 4:45 PM)			
	School of Strokes 1 (4:00 - 4:45 PM)	School of Strokes 1 (4:00 - 4:45 PM)	School of Strokes 1 (4:00 - 4:45 PM)	School of Strokes 1 (4:00 - 4:45 PM)			
School of Strokes 2 (4:00 - 5:00 PM)	School of Strokes 2 (4:00 - 5:00 PM)	School of Strokes 2 (4:00 - 5:00 PM)	School of Strokes 2 (4:00 - 5:00 PM)	School of Strokes 2 (4:00 - 5:00 PM)			
			BKKAC				
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY		
Performance (4:00 - 5:00 PM) Swim (5:00 - 6:00 PM) Dryland	Performance (4:00 - 5:30 PM) Swim	Performance (4:00 - 5:00 PM) Swim (5:00 - 6:00 PM) Dryland	Performance (4:00 - 5:30 PM) Swim	Performance (4:00 - 5:00 PM) Swim (5:00 - 6:00 PM) Dryland	COMBINED		
High Performance (5:00 - 7:00 PM) Swim	High Performance (6:00 - 7:00 AM) Dryland@MacFit (5:00 - 7:00 PM) Swim	High Performance (5:00 - 7:00 PM) Swim	High Performance (6:00 - 7:00 AM) Dryland@MacFit (5:00 - 7:00 PM) Swim	High Performance (5:00 - 7:00 PM) Swim	Performance & High Performance (7:00 - 9:00 AM) School of Strokes 1 & 2 (9:00 - 10:00 AM)		
Endurance (7:00 - 8:00 PM)	Endurance (7:00 - 8:00 PM)	Endurance (7:00 - 8:00 PM)	Endurance (7:00 - 8:00 PM)	Endurance (7:00 - 8:00 PM)			



## ALPHA AQUATICS REGISTRATION FORM

#### \*IF YOU HAVE REGISTERED ONLINE PLEASE DISREGARD THIS FORM

#### Part A: Swimmer /Member Information

Name:	First	Middle	Last		Sex:	Male	Female
Date of I	Birth: (MM/DD/YY)	Age at midnight Dec. 31	Country of Bi	rth	Countr	y of Citizer	nship
St. Addr	ress/ Postal Code			E mail	l		
Tel No:	(Home)	(Cel	1)			(Work	)
Swim N/A_	Group: Learn to	Swim I or IIStroke	e DevJr. Co	mpetitive _	_ Competitive _	_ Colleg	giate/Master
		r has any medical/physical di			-		pairment, epilepsy, autism
		er/Guardian				Guardia	n
Surna				Surname	e:		
Given	Names:			Given N	ames:		
Occup	pation (Optional	):		Occupat	ion (Optional):		
Are ye	ou on an Alpha	Committee: Yes / No	)	Are you	on an Alpha Co	mmitte	e: Yes / No
Tel: (1	H):			Tel: (H):			
Tel: (	( <b>W</b> ):			Tel: (W	·):		
Tel: (	(C):			<b>Tel:</b> (C)	:		
Emai	l:			Email:			
Mailii	ng Address:			Mailing	Address		
Part (	C: Alternate Em	ergency Contact:					
Name:		Tele	ephone:			Street/	E-Mail Address

*NB*: On the days when a swim meet is being held at the BKKAC, training for persons not participating in the meet will be held at the Windsor Pool.

*NB*: In the event that the BKKAC facility is not available due to maintenance or any other circumstances that the facility is deemed inaccessible by the National Sports Authority (NAS), training will be held at the Windsor Pool.



THE BSF IS AFFILIATED WITH: FINA - CCCAN - BOC

P.O. Box SS-6166, Nassau, Bahamas • www.bahamasswimmingfederation.com

## Competitor Registration Form

First Name	48 20 PP (27) PP (27)	
		Middle Initial
P.O. Box	City	Island
e-mail address		<del></del>
Country of Birth		Country of Citizenship
e if competitor is under 18	)	
		Phone Number
		Occupation
		-
		Phone Number
		Occupation
	BSF Year Co	ommencing Oct
City		Club ID Code
plicant is eligible to compete certificate and/or residency pe deg photo will be forwarded to	under the BSF's curr ermit and/or passport	ent rules and regulations. For new are attached and for all registrations,
gnature		Date
		Date
	Registration #:	
		=======================================
	Country of Birth  e if competitor is under 18  City  rent(s)/Guardian(s) hereby applicant is eligible to compete certificate and/or residency peop photo will be forwarded to and regulations.	Country of Birth  e if competitor is under 18)  BSF Year Co  City  rent(s)/Guardian(s) hereby apply for registration of opplicant is eligible to compete under the BSF's currectificate and/or residency permit and/or passport peg photo will be forwarded to the BSF as per the land regulations.  Ignature  Registration #:

BSF Form #: GR7.2 (Rev 09/14)



## SWIMMER TRANSFER/RELEASE FORM (Please Complete All Sections)

SECTION A	SWIMMERINFOR	MATION:		
Name:		BSF #	::	
Current Address	:	DOB:		
		Telep	hone(s):	
		Sex:	Male	Female
SECTION B	RELEASING CLUB	INFORMATION		
Present Club:			Club ID Code	:
		the above named swimmer has of I hereby approve this request	_	inancial obligations to
N/	AME	TITLE		DATE
(NOTE: Outstandir	ng financial obligation is th	ne only justifiable reason for delayir	ng or denying a r	equest for release).
SECTION C	RECEIVING CLUB	INFORMATION		
New Club:			Club ID Code	:
SECTION D	FEES:			
	Fee is B\$10.00. is effective upon receip	t by the BSF of B\$10.00 fee and	this completed	i form.
THE BSF IS AFFILIA	TED WITH: <b>FINA – CCCAN</b>	I – BOA	BSF F	orm: #GR4.1.1 (Rev 05/09)



### Individual Membership Application Form

Part A: Applicant Information			For the year beginning October:		
Surname:			First Name:		
Mailing Address:					
Home Phone:	Home Phone:				
E-Mail Address:					
Employer:		_	Occupation:		
Birthplace:		_	Birthdate:		
Club Affiliation [ ] Ye	es [] No		Club Name:		
Discipline Affiliation	[ ] Swimming		[ ] Synchronised Swir	mming	[ ] Water Polo
	[ ] Open Water Swim	nming	[ ] Master's Swimmir	ng	[ ] Diving
volunteer, it is recom Technical Volunteer A	nust choose at least on mended however that hreas:	membe	ers choose two, one fro	om each categ	ory.
[] Referee			oke/Turn Judge [] Announcer		
	[] Chief Time Keeper [] Meet Operations			[] Meet Com	iputer Operator
Administrative Volunt		[] FOO	n/racinty Set-up		
		[] Nat	ionals Committee	[] Fundraisir	ng
[ ] BSF Publicity [ ] BSF Website [ ] Nat [ ] Records/Statistics [ ] Club Relations [ ] Nat [ ] Other:					
old. I agree to abide b	PERMANENT RESIDEN by the Constitution and hin the Annual Individu	l Rules a	and Regulations of the nbership Fee.	Bahamas Swim	nming Federation
XApplicants Signatu	re		Date:		
Part C: Internal BSF us Fee Paid: Yes [] No [] Membership Number:_	Cash [ ] Cheque [	]	Application: Ac	ccepted [ ] Reje	cted [ ]
Secretary – BSF				Imeeting	