

Requirements and Waiver for Year-round Swim Team

1. The swim team season runs from August-March. No refunds will be given for incomplete season participation.
2. I understand that I am required to pay a one-time per season Admin fee of \$30.00 and Spirit Fee of \$95.00.
3. I understand that I am responsible for additional costs associated with swim meets, including but not limited too; meet fees, hotel rooms, food and membership for USA Swimming.
4. The YMCA does not offer make-up or partial refunds if you are absent to your regularly scheduled swim group.
5. In the event of thunder or lightning; the pool will close and remain closed for 30 minutes after the last sound of thunder or 30 minutes after the last sight of lightning. We do not offer any make-up days for pool closures.
6. Parents are encouraged to observe their child's practice, however, please refrain from interrupting the coach and/or class during practice. Coaches will be available to answer all your questions before and after each practice.
7. I understand that my swimmer is required to attend all YMCA league home meets & Small Team championship meets the team attends. I understand that if my swimmer qualifies for a championship meet, they are required to attend.
8. I understand that I am required to volunteer at home meets or I will be fined \$75.00 for failure to volunteer.
9. I understand that I am required to purchase my swimmer their own equipment: kickboard, pull buoy, fins. If a Dolphin or Senior swimmer; hand paddles & snorkel. All swimmers are required to purchase their own team suit, goggles and practice cap.
- 10. A late fee of \$2.00 for every minute after the end of the program the participant is registered for will be assessed for any child picked up after dismissal time If 15 minutes after dismissal lapses, my emergency contact will be called.**
11. I, the parent or guardian of the above mentioned, hereby give approval for his/her participation in any any/all camps, sport and activities. I understand that the Summerville Family YMCA assumes no responsibility for injuries or illnesses which the above referenced child may sustain as a result of physical condition or resulting from participation in any athletic activities, sports program, and the use of any equipment, exercise or other activities. I hereby release and discharge the Summerville SC YMCA, its agents, assigns and/or employees from any and all claims for injury, illness, death, loss or damage which may result from the above referenced child(s) participation in these activities. I further understand that the Summerville Family YMCA is not responsible for personal property lost or stolen while members and/or program participants are using YMCA facilities or on the YMCA premises. I give my permission to the Summerville Family YMCA to use, without limitation or obligation, photographs, film footage, or tape recordings which may include me (or my dependents) image or voice for purposes of promoting or interpreting YMCA programs. I also grant permission to the Summerville Family YMCA to authorize and obtain medical care from any licensed physician,

hospital or medical clinic, should the above referenced child become ill or injured while participating in YMCA activities if I am not available to grant authorization for emergency treatment. I realize I may be responsible for the resulting medical bills. HAVING READ, UNDERSTOOD, AND AGREED WITH THESE TERMS, I HAVE EXECUTED THIS RELEASE, TO BE EFFECTIVE IMMEDIATELY.