I/we understand and agree to the terms and conditions of the Wahoo Swim Handbook for the swim season 2020-2021. Please return this signature form with the following:

Emergency Contact Information
Health Information
Volunteer Contract
Terms and Condition for Participating
Parent Code of Conduct
Honor Code
Auto Draft

_________________________________________
Print Swimmer’s Name

_________________________________________                         __________________
Swimmer’s Signature                         Date

_________________________________________
Print Parent/Guardian’s Name

_________________________________________                         __________________
Parent/Guardian’s Signature                         Date
Wahoo Swim Team Emergency Contact

This form must be completed and turned in at the time of registration.

Swimmer’s Name
_______________________, _____________________________   _______
Last Name                                  First Name       Middle Initial

Address
_______________________
Street                                        City                        State

Email Address
_______________________
Wahoo Team information will be sent to this address, please use one that will be check regularly

Birth Date: __________________    Age: __________

Parent’s Information (Emergency Contact)

____________________________________          __________________
Name                                             Email Address

____________________________________          __________________
Phone Number                                            Alternative Number

____________________________________
Name                                             Email Address

____________________________________
Phone Number                                            Alternative Number
Swimmer’s Health Information (This is a confidential form)

Please Circle YES or NO and provide additional details were requested

Are you allergic to any medication (aspirin, penicillin, sulfa, etc.)? NO YES

If yes, please list allergies:

______________________________________________________________________________

Do you take any prescribed medication on a permanent or semi-permanent basis (steroids, anti-inflammatory, antibiotics, insulin, etc.)? NO YES

If yes, please list and give reason:

______________________________________________________________________________

Has a doctor ever told you that you have epilepsy? NO YES
When was your last seizure? _________________
Medications, if any: __________________________

Has a doctor ever told you that you were anemic? NO YES
When: ________________________________

Has a doctor ever told you that you have asthma? NO YES
Medications, if any: __________________________

Do you wear glasses or contacts during competition: NO YES

Have you had a shoulder injury in the past two years that disabled you for a week or longer? NO YES
Type of Injury: ______________________________________
Right or Left: ________________
Dates: ________________________________________________

Have you injured your knee in the past two years?        NO                      YES

Type of Injury: ______________________________________
Right or Left: ________________
Dates: ________________________________________________

Have you had a severe ankle sprain/injury in the past two years? NO                      YES

Type of Injury: ______________________________________
Right or Left: ________________
Dates: ________________________________________________

Do you have any other conditions that we should be aware of? (Ulcer, food or insect allergies, tendonitis, etc.)? NO                      YES

Specify and give details:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

_______________________________________________                       ______________________
Signature of Parent/Guardian                                                      Date:
________________________________________________________________________________________

_______________________________________________                       ______________________
Signature of Swimmer                                                                  Date:
Newport County YMCA Wahoo Swim Team
SWIM MEET VOLUNTEER CONTRACT

As one of the families that will enjoy the benefits of belonging to the Wahoo Swim Team, the following facts concerning the financial significance of well-run swim meets should be considered and recognized.

1. The Wahoo Swim Team funds its activities from two main sources. The first is the concession stand at all home meets. The second is through various fundraisers throughout the year (swim-a-thon, Pentathlon, etc.). Families are expected to contribute to both throughout the season.

2. It takes approximately 30 people or more to run every meet we host at the Newport County YMCA during the season. The presence and participation of every Wahoo Family assures our ability to continue running successful meets and alleviates unfair burden on the other volunteers.

3. For every home meet, parents are required to contribute food to the concession stand and volunteer their time in various roles during the meet. The Meet Director will volunteer sign ups on the Team Unify calendar with available positions prior to the meet. Parents who do not sign up will be assigned to fill remaining slots.

4. Away Meets and Invitational/Championship Meets will have volunteer requirements for our team. The Head Coach will receive our team timing assignments a few days prior to the meet. It is the responsibility of the parents attending the meet on those days to fill our team’s requirements. If we do not meet the volunteer requirements, our team could risk being eliminated from the meet.

___________________________________________                         ___________________
Signature of Parent/Guardian                      Date:
TERMS AND CONDITIONS FOR PARTICIPATION
Newport County YMCA Wahoo Swim Team

1. All team members are expected to maintain a current (annual) YMCA membership and be responsible for fees associated with the team. Group fees, activity fees, and meet fees must be paid upon being invoiced. If any fees, including meet entry fees, are not paid then the swimmer(s) will not be able to participate until payment is made.

2. When a swimmer is moved from one training group to another, he/she must pay the fees for the highest group in which they participate during that season.

3. Should a swimmer decide to discontinue participation in the program with the Wahoo Swim Team, the dues for the entire season and any outstanding entry fees are considered an obligation to the Wahoo Swim Team and are payable upon termination of participation.

4. All swimmers, who are members of the Wahoo Swim Team competitive training groups, are required to participate in YMCA dual meets and the SENECY Championships, as well as their highest level of achievement in championship meets (including relays).

5. Each swimmer and parent is responsible for reading and understanding the contents of the Wahoo Swim Team Handbook.

6. Parents and swimmers are expected to encourage and support all members of the Wahoo Swim Team. Negative attitudes and immature behavior are not acceptable. The image of the Wahoo Swim Team is in your hands.

7. We strive for an excellent environment for all our swimmers to achieve their goals. All members of the team will be asked to sign the Honor Code. Failure to comply with this code may result in the family being asked to leave the team.

I understand and agree to the above terms and conditions of the Wahoo 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 Wahoo Swim Team.

__________________________________________
Signature of Parent or Guardian

__________________________________________
Signature of Swimmer

Date

Date
Newport County YMCA Wahoo Swim Team
PARENT CODE OF CONDUCT

As a parent of a swimmer of the Newport County YMCA Wahoo Swim Team, I will abide by the following guidelines:

1. Practice teamwork with all the parents, swimmers, and coaches by supporting the values of Respect, Responsibility, Caring and Honesty.

2. Never coach or instruct the team or any swimmer at a practice or meets (from the stands or any other area) or interfere with coaches and/or officials on the pool deck.

3. Demonstrate good sportsmanship by conducting myself in a manner that earns the respect of my child, other swimmers, parents, officials, and the coaches at meets and practices.

4. Always maintains self-control
   a. Swimmers – Swim
   b. Coaches – Coach
   c. Officials – Officiate
   d. Parents – Parent

5. Understand that criticizing, name calling, use of abusive language or gestures directed towards the coaches, officials, other parents and/or any participating swimmer will not be permitted or tolerated.

6. Enjoy involvement with the Wahoo Swim Team by supporting swimmers, coaches, and other parents with positive communications and actions.

7. During competitions, and throughout the season, questions or concerns regarding decisions made by the meet officials are directed to a member of the coaching staff. Parents address officials via the coaching staff only.

Should I conduct myself in such a way that brings discredit or discord to the Wahoo Swim Team, I voluntarily subject myself to disciplinary actions. The Wahoo Swim Team maintains the right to remove parents from the practice and/or swims meets facilities and terminates any membership with/without cause in the interest of our vision, mission, and objectives.

____________________________________
Print Name of Parent

____________________________________                           _________________________
Signature of Parent                                                                              Date
Newport County YMCA Wahoo Swim Team
HONOR CODE

The following Honor Code is in effect throughout the year. Anyone who, in the opinion of the coach, acts in a manner that would interfere with the objectives listed below will be asked to leave immediately (at the expense of the parent and/or swimmer). Other consequences include removal from future meets, other competitions, and/or dismissal from the team.

1. Any swimmer who is known to use, possess, distribute or under the influence of alcohol, drugs or tobacco is subject to suspension from the team.
2. Profanity, inappropriate jokes, sharing of intimate details of one’s personal life and any kind of harassment in the presence of children or other parents are prohibited.
3. At all team functions, whether practices, meets or social gatherings, we expect each swimmer and parent to behave in a way that reflects positively on the team.
4. Swimmers and Parents are never to interfere with the progress of another swimmer, during practice or competition.
5. If a swimmer or parent has a problem with difference of opinion with a coach, they are expected to resolve the issue with the coach calmly, appropriately, and quickly.
6. It is important that a parent calls the Head Coach in advance when they know their child will not be able to attend a meet they signed up for. If a swimmer signs up for a meet and does not attend the family is still responsible for paying any meet fees that might be owed.
7. It is the responsibility of the swimmer/parent to stay up to date with meet information and team events by checking their email and reading the bulletin board.
8. All member of the Wahoo Swim Team, whether parents or swimmers, should continue to protect and improve the excellent reputation of the team.

We recognize our responsibility to abide by the rules and requirements of the Wahoo Swim Team. We acknowledge that we have received and read the above.

_________________________________________________
Parent/Guardian Signature                                                                         Date

_________________________________________________
Swimmer Signature                                                                                        Date