



## Pinegate Swim Team E-Registration Instructions

### 1. Welcome Letter

1.1. Keep this for reference as needed.

### 2. Sign-up Sheet

2.1. Fill-in

2.1.1. Parent's names, address, email, phone (cell preferred)

2.1.2. Put \$ amounts in each box as it applies to your family

2.1.3. Total for Swimmer(s), Total for Family Fee, add together for Total Due

2.1.4. Indicate Payment type

2.1.4.1. Cash, Check, PayPal (PayPal?, add family name in memo in PayPal to your payment)

2.1.5. Fill in info for each swimmer from your household

2.1.5.1. T-shirt size, name, age, DOB

2.1.6. Sign and Date

### 3. Emergency Medical Form

3.1. Fill-in

3.1.1. Family last name, swimmer(s) names

3.2. Choose Part I OR Part II

3.2.1. Fill in all blanks with the requested information

3.3. Sign and Date

### 4. Photo Release

4.1. Initial option 1 OR 2

4.2. Sign and Date, Print Name, Add Swimmer(s) names

### 5. COVID Liability Form

5.1. Fill-in

5.1.1. Swimmer(s) Names, Initial Boxes 1-5

5.1.2. Sign, Date, Print Name

### 6. When all items filled

6.1. Please save your forms in this format

6.1.1. Lastname.firstname.PGST2021 (Ex: Williams.Zachary.PGST2021)

6.1.1.1. NOTE: There are some required fields, if empty, saving will not be possible.

6.2. Once saved email your forms to PGST Treasurer at:

6.2.1. williamszacharyg@gmail.com

# Pinegate Swim Team 2021

Dear Pinegate Families,

We have some great news! The SSL will be having a season this summer. It will be a modified version of our "typical" season with a mix of in-person and virtual swim meets. Coach Erich and his returning coaching staff have planned some awesome events and weekly activities to keep up with our Pinegate Traditions. We will be following the Pinegate Pool and CDC's safety regulations regarding COVID-19.

A few reasons why you and your family should consider joining the swim team:

1. Swimming motivates participants to strive for self-improvement.
2. Swimming teaches life lessons of sport and sportsmanship which include learning to deal with winning and losing, as well as working with officials, teammates, and coaches.
3. Lasting friendships can be made. It is a great way to meet other families in Pinegate and a way for your child to meet other kids.

**\*\*Pinegate residents and direct family members are eligible to swim on our team. (Must be current on Pinegate Community yearly dues.)**

## **Registration for 2021:**

Swim team registration: Electronic forms will be available for registration on our [pgswimteam.com](http://pgswimteam.com) website and shared on our Facebook and Instagram Page on **Saturday, April 24th. Registration Forms must be completed prior to attending the first practice.** *There will also be an option to sign up in person on Saturday, May 8th at our PGST season kick-off.*

**Payments:** Online via PayPal or by checks payable to Pinegate Swim Team. **Swim team payment must be submitted before the first meet in order to compete and practice.**

**Calendar:** Will be available online on our team website, Pinegate Swim Team Facebook page, and attached. The calendar is subject to change. The online version will be the most up-to-date. If changes are made, we will communicate via email and Remind. We plan on having daily practices, lap swims, weekly meets, fundraisers, and team events.

## **Coaches for 2021:**

Erich Schulz: Head Coach      Sean Farmer: Assistant Head Coach

McKenna LaGanke: Assistant Coach      Eric Thompson: Assistant Coach

**\*\*New for 2021: 16-18 swimmers will be competing and participating with our team. Many will also be assisting as Coaches in Training.**

## **2021 PGST Board:**

President: Allison Lentz  
Secretary: Jennifer Hiltunen

Vice President: Dave Kilkenney  
Events: Meggin Higgins

Treasurer: Zachary Williams

**Daily Practice Schedule TBA** \*\*a.m. practice times are based on age and skill level and are subject to change per coach assessments.

Monday	Tuesday	Wednesday	Thursday	Friday
8:00-10:00 am Group 5	8:00-10:00 am Group 5	8:00-10:00 am Group 5	8:00-10:00 am Group 5	8:00-9:00 13-15s
8:00-9:30 am Group 4	8:00-9:30 am Group 4	8:00-9:30 am Group 4	8:00-9:30 am Group 4	9:00-10:00 9-12s
9:30-10:30 am Group 3	9:30-10:30 am Group 3	9:30-10:30 am Group 3	9:30-10:30 am Group 3	10:00-11:00 8 and under
10:00-11:00 am Group 2	10:00-11:00 am Group 2	10:00-11:00 am Group 2	10:00-11:00 am Group 2	
10:30-11:15 am Group 1	10:30-11:15 am Group	10:30-11:15 am Group 1	10:30-11:15 am Group 1	
All-Age Lap Swim 5-6 pm	16-18 practices 5-6 pm (new)	All-Age Lap Swim 5-6 pm	16-18 practices 5-6 pm (new)	All-Age Lap Swim 5-6 pm

\*\*Full PGST Calendar will be available after the May 3rd Suburban Swim League Meeting.

# 2021 PGST SIGN UP FORM

PARENT(S) NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_

**If not a Pinegate resident (current or former) please provide your sponsor name and address\*:**  
 \*Non-Family swimmers are subject to an additional fee

SPONSOR NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

	1 SWIMMER \$80.00	
	2 SWIMMERS \$150.00	
	3+ SWIMMERS \$215.00	SWIMMER TOTAL \$ _____

FAMILY FEE (PER FAMILY) \_\_\_\_\_

**FAMILY FEE**

	1 SWIMMER \$60.00	GATORWEAR _____
	2 SWIMMERS \$80.00	
	3 OR MORE SWIMMERS \$100.00	TOTAL DUE _____

PAID CASH \_\_\_\_\_

PAID CHECK \_\_\_\_\_

PAYPAL \_\_\_\_\_

Family Fee Covers  
 Concessions - Pizza - Marathon  
 Coaches Gift - SSL Fee - Champs Shirts  
 Caps - Banquet - Awards

**\*\*\* Each Swimmer is expected to raise a minimum of \$50 by any of the following combinations: selling raffle tickets, marathon donations, and corporate sponsors.**

I hereby give my permission and assume full responsibility for my child(ren) to participate on the Pinegate Swim Team and thereby release the Pinegate Swim Team and its Executive Board, the Pinegate Homeowners Association, volunteers, or members from any liabilities whatsoever and I understand that no insurance will be provided.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**SWIMMER #1** T-Shirt Size: \_\_\_\_\_

NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ DOB: \_\_\_\_\_

**SWIMMER #2** T-Shirt Size: \_\_\_\_\_

NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ DOB: \_\_\_\_\_

**SWIMMER #3** T-Shirt Size: \_\_\_\_\_

NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ DOB: \_\_\_\_\_

**SWIMMER #4** T-Shirt Size: \_\_\_\_\_

NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ DOB: \_\_\_\_\_

**SWIMMER #5** T-Shirt Size: \_\_\_\_\_

NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ DOB: \_\_\_\_\_

CHECK NUMBER \_\_\_\_\_



**EMERGENCY MEDICAL AUTHORIZATION - PINEGATE SWIM TEAM 2021**

Last Name \_\_\_\_\_

<b>Swimmer(s) Names</b>
1.
2.
3.
4.
5.

**PART I OR II MUST BE COMPLETED**

**PART I: TO GRANT CONSENT**

In the event reasonable attempts to contact me at (phone) \_\_\_\_\_ or (other parent/guardian) \_\_\_\_\_ at (phone) \_\_\_\_\_ have been unsuccessful, I hereby give my consent for: (1) the administration of treatment deemed necessary by (preferred physician) \_\_\_\_\_ at (phone) \_\_\_\_\_

\_\_\_\_\_ or (preferred dentist) \_\_\_\_\_ at (phone) \_\_\_\_\_, or in the event that preferred practitioner is not available, by another licensed physician or dentist; and (2) the transfer of child to \_\_\_\_\_ or any hospital reasonably accessible. The following are facts concerning my child(ren)'s medical history, including allergies, medications, and physical impairments to which a physician should be alerted:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

**PART II: REFUSAL TO CONSENT**

I do not give my consent for emergency medical treatment of my child(ren). In the event of an emergency, I wish the Pinegate Swim Team to:

(a) Take no action

(b) (describe) \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

## 2021 Photo Release Form for Pinegate Swim Team

*(Please Initial)*

1. \_\_\_\_\_ The Pinegate Swim Team Board has my permission to use my or my child's photograph publically to promote the team. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.
2. \_\_\_\_\_ The Pinegate Swim Team Board DOES NOT have my permission to use my or my child's photograph publicly to promote the team.

Parent/Guardian's signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Swimmer(s) Names

## PGST: COVID-19 Liability Release Waiver

Due to the 2019-2020 outbreak of the novel Coronavirus (COVID-19), The Pinegate Swim Team is taking extra precautions with the care of every athlete to include health history review and enhanced sanitation/disinfection procedures in accordance with the Center for Disease Control.

Symptoms of COVID-19 include:

- Fever
- Fatigue
- Dry Cough
- Difficulty Breathing

Swimmer(s) Names
1.
2.
3.
4.
5.

I agree to the following: (Please initial)

	I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced the symptoms listed above WITHIN THE LAST 14 DAYS.
	I affirm that I, as well as all household members, have not been diagnosed with COVID-19 WITHIN THE PAST 30 DAYS.
	I affirm that I, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 WITHIN THE PAST 30 DAYS.
	I affirm that I, as well as all household members, have not traveled outside of the country, or to any city considered to be a "hot spot" for COVID-19 infections WITHIN THE PAST 30 DAYS.
	I understand that The Pinegate Swim Team or the Pinegate Community Board cannot be held liable for any exposure to the COVID-19 virus caused by misinformation on this form or the health history provided by each athlete.

The Pinegate Swim Team is following these enhanced procedures to prevent the spread of COVID-19:

- Smaller practice/meet sizes (No more than 25 people in the pool area, including coaches)
- Transition time between practices/meets
- Guests accompanying athletes must stay out of the pool area (Can be in the grass or pavilion area while maintaining social distance)
- Each athlete required to wear a mask upon entering the pool and during coach designated activities.
- All PGST coaches will be wearing masks
  - Bathroom use will be at a minimum. (There will be no changing clothes in the bathrooms)

By signing below, I agree with each statement above and release The Pinegate Swim Team from any and all liability for the unintentional exposure or harm due to COVID-19.

The Pinegate Swim Team agrees to abide by these standards and affirms the same.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent/Guardian Name (print) \_\_\_\_\_