

Swimmer Name: \_\_\_\_\_

Guardian Name: \_\_\_\_\_

**Parent Board Approval:**

☐ Winter ☐ Fall ☐ Spring **Clinic** \_\_\_\_\_ **Season** \_\_\_\_\_

## Swans Parent Checklist

Every Swimmer must have **all completed paperwork and money turned in** to enter the water.

*No Exceptions.*



**For:** **Fall Clinic** ☐ **Winter Clinic** ☐ **Spring Clinic** ☐

- ☐ Swimmer Registration & Medical Form
- ☐ Waiver & Release of Liability/Publicity Release Authorization Form
- ☐ Registration Fee for Clinic \*\*



**For** \_\_\_\_\_ **Swim Season (starting** \_\_\_\_\_ **)**

All the above, PLUS

- ☐ Registration Fee for Swans Swim Season (or monthly payment plan in place)
- ☐ \$250 Family Volunteer Hours Deposit Fee/Check (not cashed unless required volunteer hours are not completed by the end of season).
- ☐ Swimmer's Contract Packet
- ☐ Completely filled out Vacation Calendar (note *None* for no planned absences)
- ☐ Sign up for Spond App for the Sunrise Swans with at least (1) **Guardian with access**

\*\*All registration fees are non-refundable

# Swimmer Registration Form Page 1

Please be sure to fill out both sides/pages (2) of this form completely:

## Swimmer Information

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Swimmer's Cell \_\_\_\_\_

Address \_\_\_\_\_

☐ My swimmer has permission to sign themselves out at the end of practice. Parent Initials \_\_\_\_\_

## Parent/Guardian Information

### Guardian 1:

Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

### Guardian 2:

Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Address: \_\_\_\_\_

If different than Guardian1

Email: \_\_\_\_\_

## Alternative Emergency Contacts:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

## Swimmer Registration Form Page 2

### Insurance Information:

Company: \_\_\_\_\_ Group/Policy # \_\_\_\_\_

Primary Member: \_\_\_\_\_

### Medical Information:

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

Address: \_\_\_\_\_

Hospital: \_\_\_\_\_ Phone: \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

Known Medical Condition/Allergies: \_\_\_\_\_

\_\_\_\_\_

### Authorization to Render Emergency Care: (Check the desired action)

☐ In the event of an accident or emergency, the undersigned hereby authorizes a representative of the Sunrise Swans Artistic Swimming Team, including coaches, lifeguards, and parents volunteers/chaperones, to make such arrangements as they consider necessary for the swimmer to receive medical care from an emergency medical team member or to be transported to a medical facility for further treatment by a licensed medical provider while the summer is under the supervision of the team.

☐ I/We do not choose the above option for the following reason(s):

\_\_\_\_\_

\_\_\_\_\_

### Parent/Guardian Signature:

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

## Swimmer Registration Form Page 3

### Sunrise Swans Artistic Swim Team Waiver and Release of Liability

In consideration of being allowed to participate in the Sunrise Swans Artistic Swim Team events, activities, or programs, I've knowledge and agree that:

1. I understand that I/ my child or ward will be engaging in travel and activities that involve the risk of serious injury, including permanent disability and death, severe social and economic losses and other losses including damage to property.
2. I knowingly and freely assume all such risks.
3. I, for myself, my minor child or ward, and on behalf of my and their heirs and assigns, release, waive, discharge and covenant not to sue Sunrise Swans, it's officers, agents, employees, and sponsors as well as its affiliate clubs, from any and all liability for any and all claims, demands, losses or damages on account of injury, including death and damage to property, whether caused by negligence or otherwise.

This is to certify that, as swimmer (18+) / parent/guardian of this participant, I do consent to his/her waiver and release as set forth above and agreed to assume all such risks and to waive the right to sue the releases.

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Name of Swimmer

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Signature of Parent/Guardian/Swimmer 18+

Print Name

Date

### Sunrise Swans Artistic Swim Team Publicity/Media Release Authorization

I, hereby give permission to have my child's picture and name printed in any publicity, website, or media for the purpose of promoting the Sunrise Swans Artistic Swim Team.

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Name of Swimmer

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Signature of Parent/Guardian/Swimmer 18+

Print Name

Date

## Swimmer's Attendance Contract Page 4

**Purpose:** To provide the coaches, as well as each swimmer, with an understanding of expectations required to learn, practice, and perform a synchronized swim routine and figures scheduled for competition. To achieve this, swimmers are responsible for honoring the commitment they made when they registered for the team. This contract is based upon the overall principles of mutual respect for the time and commitment of each swimmer. To help achieve these goals, we ask that all swimmers, parents and coaches read, understand and agree to the following Contract:

### Expectations:

As a member of the Sunrise Swans Artistic Swim Team, I will strive to meet the following attendance expectations listed below:

- I *will* be at every scheduled practice on time and be ready to learn, practice, or perform the routine(s) in which I am swimming. Additionally, whenever possible, I will practice my routine/figures at home.
- I *will* contact my coaches if an **emergency** arises and I will be late or absent (wanting to spend time at home, or with friends, is **NOT** considered an emergency).
- I understand that others in my routine depend on me, and my attendance and commitment is vitally important to the success of our routine.
- I further understand that excessive unexcused absences, or failure to follow these expectations, may result in any number of consequences. These may include, but are not limited to:
  - Removal from the routine(s) for competition purposes.
  - Dismissal of participation/attendance in one or more meets.
  - Removal from future competition and/or practices and meeting with parent or guardian.

I understand that my compliance with this Attendance Contract is a direct reflection on my commitment to the team as well as me as a responsible member, and I should only conduct myself in a way that brings credit and respect to the Sunrise Swans. If I fail to comply, I voluntarily subject myself to disciplinary action. Depending upon the severity and/or frequency of the incident(s) one or all the potential disciplinary actions may be taken. I understand that if I want to appeal against any disciplinary action, my appeal shall be heard by the Sunrise Swans Parent Board and/or coaching staff.

I understand that by signing this document I agree to comply with this Swimmer's Attendance Contract.

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Signature of Swimmer

Print Name

Date

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Signature of Parent

Print Name

Date

## Swimmer's Code of Conduct Contract Page 5

Each swimmer is expected to abide by such Swimmer's Code of Conduct. Each **SWIMMER** and a **PARENT/GUARDIAN** must sign the code of conduct to acknowledge receipt of the same and to agree to abide by its terms in order to prevent any misunderstandings.

- Swimmers will treat coaches, officials, parents, volunteers and other swimmers with respect.
- Swimmers will not use abusive or threatening language or gestures towards coaches, officials, parents, volunteers or other swimmers.
- Swimmers shall not engage in fighting or other physical acts towards coaches, officials, parents, volunteers or other swimmers.
- Swimmers shall not damage property at the Antelope Pool, or other pools or the personal property of any swimmer.
- Swimmers shall not lie or steal.
- Swimmers shall not use or possess tobacco, drugs, or alcohol.
- Swimmers shall not commit acts of bullying in any form.
- Swimmers shall not engage in any unsafe behavior.
- Swimmers shall refrain from unsportsmanlike-like conduct.
- Swimmers shall not use or possess weapons.

I have read the Swimmer's Code of Conduct for the Sunrise Swans Artistic Swim Team. I reviewed the document with my child. We agree to abide by its terms. Any violation of the code may result in the following disciplinary action, at the discretion of the Sunrise Swans Parent Board and/or coaching staff, as follows:

- First violation – dismissal from the current practice session and potentially the next practice session.
- Second violation – removal from future competition and/or practices and meeting with parent/guardian, swimmer and Sunrise Swans Parent Board and/or coaching staff.
- Third violation – temporary or potentially permanent dismissal from the team without program refund.
- Depending upon the severity and/or frequency of the incident(s) one or all of the potential disciplinary actions may be taken.

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Signature of Swimmer

Print Name

Date

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Signature of Parent

Print Name

Date

## Swimmer's Social Networking Code of Conduct Contract Page 6

**Purpose:** To provide every swimmer with the opportunity to enjoy a safe, non-threatening, bully-free environment in which they can reach individual and team goals. This is based upon the overall principles of mutual respect and cooperation. To achieve this, swimmers are responsible for maintaining a POSITIVE AND COOPERATIVE attitude at all practices, meets, team events, as well as within social media sites (i.e. Facebook, Instagram, Snapchat, TikTok etc.).

**Guidelines:** As a member of the Sunrise Swans Artistic Swim Team, I will strive to meet the following Social Networking Code of Conduct as listed below:

- At ALL times, when posting comments about this team, or any individual member, I will only encourage good sportsmanship by demonstrating positive support for all players, coaches, officials, volunteers, and our opponents at every meet, practice, or other team event. I will also show respect to all parents, swimmers, and coaches by supporting the values of discipline, loyalty, commitment and hard work, and using only appropriate language when doing so.
- At ALL times, when posting comments, I will treat my Coaches, other swimmers, officials and parents with respect regardless of race, sex, creed or abilities and I will expect to be treated accordingly.
- At ALL times, when on a social networking site, if inappropriate comments arise regarding any member of this team (swimmers, coaches, parents), I will choose not to engage in a response, but rather do my best to either ignore, change the topic, or respond by identifying the inappropriateness of the comment.
- I understand that failure to follow these guidelines completely will not be tolerated by any member of the team and may result in disciplinary action. This discipline may include, but may not be limited to:
  - Removal from future competition and/or practices and meeting with parent or guardian.
  - Dismissal or termination of participation/attendance in one or more practices/meets.
  - Dismissal or termination of participation/attendance for the season without program refund.

I understand that my compliance with this Social Networking Code of Conduct is a direct reflection on the team, as well as myself. Depending upon the severity and/or frequency of the incident(s) one or all the potential disciplinary actions may be taken. I understand that if I want to appeal against any disciplinary action, my appeal shall be heard by the Sunrise Swans Parent Board and/or coaching staff.

I understand that by signing this document I agree to comply with this Social Networking Code of Conduct.

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Signature of Swimmer

Print Name

Date

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Signature of Parent

Print Name

Date

## Sunrise Swans' Season Handbook Acknowledgment Page 7

By signing below you acknowledge that you received a the [Sunrise Swans Team Handbook](#). You understand and agree to the contents and any questions have been brought to the board for review.

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Signature of Swimmer

Print Name

Date

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Signature of Parent

Print Name

Date

## Sunrise Swans Team Season Volunteer Requirements:

By signing below you acknowledge that you understand the following:

- “Parent Volunteer Requirements” as stated in the [Sunrise Swans Team Handbook](#), page 6-8.
- You have given the \$250.00 required volunteer deposit and understand this check serves as a deposit towards the required volunteer hours during the season and will not be cashed unless the volunteer requirement is not completed by the end of the season.
- You understand and agree to the contents and any questions have been brought to the board for review.

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Signature of Parent

Print Name

Date