



2023-2024 REGISTRATION FORM

Swimmer's Last Name: _____

Swimmer's Given Names: _____

Gender M F Date of Birth DD/ MM/ YY ___/___/___ Age as of Dec 31/2022 ___

Street Address _____

Town _____ Province _____ Postal Code _____

Returning HHAC swimmer Y N Changes to last year's information Y N

Contact Email (s) _____/_____

Contact Information- PLEASE complete google form that will be sent out in email.

Swimmers must be able to swim one length of the 25m pool independently. A swimmer's practice lane is based on pace/skill not always age. Please review policies and procedures found on the HHAC website.

Vanastra Recreation Centre

HHAC FEES LEVEL	1 DAY	2 DAY	3 DAY
<input type="checkbox"/> Fundamentals age 6-8 1hr/wk	<input type="checkbox"/> \$242.00		
<input type="checkbox"/> Novice age 8-10 2hr/wk	<input type="checkbox"/> \$242.00		
<input type="checkbox"/> Junior ages 11-12 ~3hr/wk	<input type="checkbox"/> \$341.00	<input type="checkbox"/> \$632.00	
<input type="checkbox"/> Intermediate ages 13-14 ~8hr/wk	<input type="checkbox"/> \$399.00	<input type="checkbox"/> \$748.00	<input type="checkbox"/> \$1055.00
<input type="checkbox"/> Advance ages 15+ ~8hr/wk	<input type="checkbox"/> \$399.00	<input type="checkbox"/> \$748.00	<input type="checkbox"/> \$1055.00

Goderich YMCA

HHAC FEES LEVEL	1 DAY	2 DAY
<input type="checkbox"/> Fundamentals age 6-8 1hr/wk	<input type="checkbox"/> \$195.00	
<input type="checkbox"/> Novice age 8-10 2hr/wk	<input type="checkbox"/> \$195.00	
<input type="checkbox"/> Junior ages 11-12 ~3hr/wk	<input type="checkbox"/> \$275.00	<input type="checkbox"/> \$549.00
<input type="checkbox"/> Intermediate ages 13-14 ~8hr/wk	<input type="checkbox"/> \$321.00	<input type="checkbox"/> \$603.00
<input type="checkbox"/> Advance ages 15+ ~8hr/wk	<input type="checkbox"/> \$321.00	<input type="checkbox"/> \$603.00

Combined HHAC Fees Swimming at Both Pools (Vanastra and Goderich) - Intermediate and Advanced

Vanastra 3 days	Goderich 2 days	Total
\$1,055.00	\$539.00	<input type="checkbox"/> \$1,594.00
Vanastra 3 days	Goderich 1 day	
\$1,055.00	\$270.00	<input type="checkbox"/> \$1,325.00
Vanastra 2 days	Goderich 2 days	
\$748.00	\$539.00	<input type="checkbox"/> \$1,287.00



Vanastra 1 day	Goderich 2 days	Total
\$352.000	\$603.00	<input type="checkbox"/> \$955.00

Please Note:

Goderich YMCA requires our swimmers to hold a membership within the child/individual/household Enhanced or Everything tier. YMCA membership will be the responsibility of each swimmer. Financial Assistance is available through the YMCA if there is a financial barrier.

SWIM ONTARIO FEES *Swimming Canada, Swim Ontario fees are mandatory and non-refundable

Category (check one)	Swimmer's Age at Dec. 31/23	Swim Fees
<input type="checkbox"/> Pre -Competitive	All Ages	\$54.05
<input type="checkbox"/> Competitive (Fundamental)	8 & Under	\$123.90
<input type="checkbox"/> Competitive (Skills)	9 – 10	\$143.90
<input type="checkbox"/> Competitive (Development)	11 – 14	\$163.90
<input type="checkbox"/> Competitive (Open)	15 & Over	\$183.90

Swim Ontario Fees (see chart above) are nonrefundable due at registration TOTAL= \$ _____

Payment Options:

HHAC FEES \$ _____ + S.O. Fees _____ + Fundraiser fee \$100.00 TOTAL= \$ _____

Full payment at registration: total fees as calculated above.

E-transfer hhactreasurer25@gmail.com (swimmer(s) name and level in comments)

cheque # _____

7 monthly installments: dated October, 15, 2023 through March 15, 2024 (S.O fees & first month due at registration)

E-transfer hhactreasurer25@gmail.com (swimmer(s) name and level in comments)

Cheque #'s _____

\$100.00 fundraising fee for cash raffle (you will receive 10 raffle tickets to be sold or kept for self due at registration or by post-date cheque dated December 1st, 2023). Extra tickets are available upon request to increase our club sales.

Plus \$300.00 volunteer bond (post-date June 15th, 2024 cheque will not be cashed if volunteer requirements of 10 hours fulfilled). Cheque # _____

Signature of Parent/ Guardian _____ **Date** _____



2022-2023 EMERGENCY MEDICAL INFORMATION, AUTHORIZATION AND RELEASE

Swimmer's Last Name _____

Swimmer's Given Names _____

Gender M F Date of Birth (DD/ MM/YY) _____ Age as of Dec 31/2022 _____

EMERGENCY CONTACT INFORMATION

Parent/ Guardian's Name (1) _____ Phone _____

Parent/ Guardian's Name (2) _____ Phone _____

Alternate Contact Name _____ Phone _____

MEDICAL INFORMATION Please list any known asthma, allergies or any other medical condition(s) Description (i.e. asthma) Medication (i.e. inhaler) When to be **taken? Purpose? Side Effects?**

Does your swimmer carry and know how to administer their medication? Y N If not, who carries the swimmer's medication?

(Name) _____ (Contact number) _____

MEDICAL AUTHORIZATION

I, the undersigned parent / guardian of the above named swimmer hereby authorize and permit the Huron Hurricanes Aquatic Club, its directors, employees, coaches, volunteers and agents, to provide or obtain any emergency medical treatment necessary for the safety and well being of the said swimmer in the event that the above noted emergency contacts cannot be reached for authorization in a timely manner.

Parent/ Guardian signature _____ **Date** _____

All information contained in this document and shall be kept confidential and shall be used by the Huron Hurricanes Aquatic Club, its directors, employees, coaches, volunteers and agents solely for the purpose of swimmer safety.



Volunteer Interest

Please indicate the following areas you are most interested in providing assistance with. **Your help is vital to keep the Club operational and cost-effective.** Space is provided for both parents/Guardians.

Athlete's Name _____

Parent/Guardian Name _____

Parent/Guardian Name _____

Alternate Name _____

Please check all that apply

	Parent or Guardian's Interest	Parent or Guardian's Interest
Executive- filled for 2023/2024		
Club Development		
Communications (update bulletin boards)		
Team equipment cleaning- filled		
Volunteer coordinator		
Website- filled		
Officials- (Timer)		
Level 1 Coaching Certificate (refundable after 1 year on deck coaching)		
Swim A Thon		
Advertising and promotions		
Organizing club dinners/events		
Christmas Parades		



Liability Release

I, the undersigned, acknowledge that the Huron Hurricanes Aquatic Club assumes no liability arising from personal injury, damages or loss of personal property while involved in or associated with any Club activity. As well, I hold club members, coaching staff, administrators or duly authorized persons harmless from liability and hereby authorize the above to take actions they deem necessary to correct, or attempt to correct, any situation which has resulted in personal injury, property damage or loss of personal property while involved with any Club associated activity.

Signature of Parent/Guardian _____ Date _____

Signature of Athlete _____ Date _____

E-Mail Agreement

During the swim season it is necessary for the club to contact members on a regular basis regarding swim meets, meetings and general club information. Communication within the club will be primarily through e-mail and only in exceptional circumstances will members be phoned about upcoming events. If you have any concerns about this policy please let an Executive member know at time of registration.

Your mailing address, phone number and email address will be published in the Executive's contact book, which is only made available to Executive members. Please notify the Executive if you change your address, email or phone number.

Photo Agreement

The HHAC website and Facebook page will provide up to date information on club events and swim meets. If you want to see results and pictures of swim meets and events, you will see them there.

We would like to post pictures from swim meets as a means of promoting team spirit.

- I have read and understood the above agreements
- I agree to **allow** my child's photo to be used on the HHAC website and Facebook pages.
- I **do not** want my child's photo to be used on the HHAC website and Facebook pages.

Signature of Parent/Guardian _____ Date _____

Signature of Athlete _____ Date _____