

Team Genesis Swim Club & LOVE Swimming

A Sports Ministry of Trinity Fellowship Church

Education Ministry since 1994

Genesis Academy Christian School, Pre-K thru 12th Grade

Sports Ministry since 1997

LOVE Swimming & Team Genesis

Sports Ministry Registration & Payment Fees Worksheet (One swimmer per form)

“Competitive Level Memberships Only”

“You are **NOT** required to be a member of any of our Training Sites- Some Sites charge Daily Use Fee
New Team Genesis/LOVE Swimming Member - Returning Team Genesis/LOVE Swimming Member (Circle one)
Fall/Winter Swim Season Fees OR Spring/Summer Swim Season Fees (Fee Schedule online) Total

Seasonal Program Fees (are non-refundable except – medical/relocate)	S - L	
1. Training Group Fee		
2.		
3.		
4.		
Sub-Total Program Session Fees		
Discount (s): _____ = _____ (Program Fees Only)		
Sub-Total Program Session Fees		()
Total Program Fees Due (include discounts if applicable)		

Annual Registration Sign-up & Membership Fees (are non-refundable and not eligible for discounts) Total

*Initial Registration/Membership Fee (1st year members only) \$85	
1st Year Returning Member (per swimmer) \$85.00	
2nd Year+ Returning Member (per swimmer) \$125.00	
Total Registration Fees Due	
Total Amount Due (Registration & Program Fees): \$ _____	

Family Information

Swimmer	Employer/School	Home#
Swimmer/Parent/Guardian Name	Employer/Other	Work#
Address		Cell#’s
City, State & Zip		Emerg#
Email:	Emergency Contact:	Pager#

Parent/Guardian/Swimmer Payment Agreement

I agree to pay Trinity Fellowship by Check, Cash, Credit/Debit Card All Fees due. Also, I agree to pay for all other Program, Camps, Clinics, Meet Fees, Travel Exp., Deposits, Apparel, Equipment, & Supply Fees except those due for payment options as they occur.

ALL Monthly payments require completion of our Payment Information Form.

You will receive a 5% coupon for Payment Option#1 and a 2% coupon for Payment Option #2

For Monthly payment amount take total due and divide by 6 for SCS or 4 for LCS + 4.50 per payment

Option#1 ___: One Payment of \$ _____ (Includes Program and Registration Fees)

Option#2 ___: Registration Payment \$ _____, 50% Program Fees Upfront\$ _____, 2 Monthly Payment \$ _____

Option#3 ___: Registration Payment \$ _____, Monthly Payment \$ _____

Signature (Parent/Guardian/Swimmer): _____

Received by: _____ Date _____

***Ozark Outreach will reimburse swimmers who qualify for the outreach rate if they are on (1) Medicaid, (2) School Lunch Program or (3) Income is at or below Poverty Level (proof has to be submitted with Registration form, otherwise swimmers are required to pay \$85 for 1st & 2nd year, then \$125 yearly due on August 1st of each year. This applies to all youth and adult swimmers.**

8144 Terre Bleue Drive * P.O. Box 345 * Bonne Terre, Missouri 63628 *

Office/Fax: 573-358-7727 * Cell: 573-366-0410

E-mail programs@loveswimming.org * web address: www.loveswimming.org

“Love one another. As I have loved you, so you must love one another.”

John 13:34

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Payment Authorization & Information Form

To set up a recurring payment you are required to complete, sign and submit this form. This form is **REQUIRED FOR ALL** programs that have membership payment options.

2020 - 2021 Annual Swim Season

Membership Payment Options are available for:

- **Competitive Level Swim Programs (see cost @ shop.loveswimming.org),**
 - **Personal Best Time Meet Entry Fee (\$104.00) - Annual**
 - **Swim Meet Admin non-Championship Meet Fee (\$200.00) - Annual**
- **Swim Meet Admin Fee -Championship Swim Meets (\$120.00) - Annual**
- **Short-Course Endurance Swim Camp (\$300.00) September - March**
 - **Long-Course Endurance Swim Camp (\$280.00) April - August**

Membership Payment Options cannot be used for:

- **Registration & Membership Sign-up Fees,**
- **Swim America Classes (Group & Private, Infant/Child, Youth & Adult),**
 - **Host Team Swim Meet Entry Fees**
 - **Technique Swim Clinics,**
 - **Pre-Season Swim Camps,**
 - **Championship Training Swim Camps,**
 - **Winter Training Swim Camps,**
 - **Swim Apparel, Gear & Equipment**

Please select payment option number below. ALL Monthly payments (ACH Check, Debit/Credit card) are due on the 1st day of each month and will be deducted from your account on the 1st day of each month. For payment option #2 or #3 you can make up to 6 monthly payments for Short Course Season (SCS) which is September 1st through March 1st and 4 monthly payments for the Long Course Season (LCS) which is April 1st through July 1st .

For total monthly payment due take total payment and divide by 7 for short course season or 5 for long course season and add \$4.50 per monthly payment to get total monthly payment amount.

A \$4.50 Processing Fee for processing monthly payments and will be added to each monthly payment. A \$75 late fee will be charged if Registration Sign-up & Membership fee is not paid by August 31st of each year for the Annual Swim Season (August - March) and March 31st of each year for the Long-Course Swim Season (April –August). Registration Sign-up & Membership Fees cannot be discounted.

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Payment Authorization & Information Form Continued

***Registration & Down payment Fees are both due upfront at Registration (August)**

Payment Option#1 (5% program discount): \$Amount: _____ (Registration & Program Fees)
(August)

Payment Option #2 (2% program discount):

*Registration \$: _____ Down Payment\$ (50%): _____ Monthly Payment\$ (2 payments) _____
(November & February)

Payment Option #3 (no discounts):

*Registration \$: _____ and Monthly Payment (10 payments total) \$: _____
(September, October, November, December, January, February, March, April, May, & June)

Payment Type:

(ACH) Check ____ Bank Routing # _____ Checking Account # _____
Debit/Credit Card ____ MasterCard ____ Visa ____ Discover ____ America Express ____

Debit/Credit Card Number: _____

Expiration Date: _____ Security ID (3 Digit #): _____

Name on Account: _____

Organization (if applicable): _____

Signature: _____

Notes (Describe what your payments are for): _____

Athlete Name(s): _____

as a participant or as a parent/ legal guardian in the Trinity Fellowship Sports Ministry Program represented by the registration and payment form, I agree to hold Trinity Fellowship, Team Genesis Swim Club, LOVE Swimming and its officers and agents free and harmless from any claim or expense that may arise due to my participation in this program.

Signature: _____ Date: _____

You can mail ALL registration and payment information to: Trinity Fellowship, P.O. Box 345, Bonne Terre, Missouri 63628 or you can make debit credit card payments on-line at shop.loveswimming.org. You can Fax Program Sign-up and ALL Payment Information to 573-358-7727 or email Sign-up and ALL Payment information to programs@loveswimmng.org.

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