

Head Coach: Mr. Travano McPhee

APPLICATION FORM

Child's Name:	Sex: M/F (circle)						
Date of Birth (mm/dd/yyyy):	P.O. Box #:						
Present School:							
Street Address:	Preferred Telephone Contact:						
Mother's name:	Work #:						
Cell#:	Email:						
Father's name:	Work #:						
Cell#:	Email:						
	er in the program(s) below (please tick option):						
Competitive Swim Learn to Swim	Improve Your Stroke 1 Improve Your Stroke 2 Adult Swim						
	APPLICANT'S HEALTH HISTORY						
Name of Doctor:	Phone #:						
List of any allergies known:							
Is the Applicant on any med	ication: Yes No If yes, please give details						
Name of relative/friend that be reached:	can easily be contacted in case of an emergency if Parent(s) cannot						
Name:	Telephone #:						
Signature:	Date:						
No refunds • Pl	ease make checks payable to: "Mako Aquatics Club"						



(C) 431-1441

 $\begin{array}{ll} \textbf{(E)} \ \underline{admin@makoaquaticsclub.com} \\ \textbf{or} \ travano.mcphee@gmail.com} \end{array}$

WAVIER

I, the undersigned give consent for my son/daughter, (in case of a minor), to participate in training sessions sponsored by Mako Aquatics Club. I consent to my/minor's participation in the activities and acknowledge that the minor and I fully understand that his/her participation may involve risk of serious injury, including losses which may result not only from my/minor's own actions, inactions or negligence, but also from the actions, inactions, or negligence of others, the condition of the facilities, equipment, or areas where the event or activity is being conducted, and/or the rules of play of this type of event or activity. I understand that if I have any risk concerns, I should discuss the risks associated with my participation with the coaching staff, before I sign this document and before any activities begin. In consideration of allowing Minor Participant to participate in the activities, I hereby release and hold harmless Mako Aquatic Club, the coaches and members of its Board of Directors, officers, employees, volunteers, and other participants, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that Minor Participant may have or sustain with respect to any and all damage and/or injury, of any type, arising out of his or her participating in the activities. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect. I understand that whilst the coach and/or assistant in charge of the team will take all reasonable care of swimmers, they cannot be held responsible for any loss, damage or injury suffered by my son/daughter/(me) whilst travelling to or from, or taking part in any club activities. In consideration of allowing Minor Participant to participate in this event, I hereby release and hold harmless the Released Parties, of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that I may have or sustain with respect to any and all damage and/or injury, of any type, arising from Minor Participant's participation in the activities. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect. I certify that my/minor is in good health and have no physical condition that would prevent participation in this activity. Furthermore, I agree to use my/minor's personal medical insurance as a primary medical coverage payment if accident or injury occurs. I consent to any emergency medical treatment that may become necessary during the course of any authorized club activity. I understand that, save for emergency treatment, in the case of any minor swimmer; it is the responsibility of the parent/guardian responsibility to ensure that any necessary medication relating to any medical condition is administered and that no club official is responsible for the administration of any drug/medication. The undersigned parent/guardian further agrees to indemnify, save and hold harmless the Released Parties from any and all claims, demands, losses, damages and liabilities for indemnities, contribution or otherwise with respect to any damage and/or injury, of any type, arising from Minor Participant's participation in the activities. The undersigned also agrees that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the Signee and is intended to be as broad and inclusive as is permitted by the laws of the State in which the Event(s) is/are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Name of Minor:	Name of Parent:	
Parent/Participant Signature:	Date:	



(C) 431-1441

 $\begin{array}{ll} \textbf{(E)} \ \underline{admin@makoaquaticsclub.com} \\ \textbf{or} \ travano.mcphee@gmail.com} \end{array}$

EQUIPMENT LIST



Equipment can vary by group. Please confirm your swimmers group before purchasing equipment. Equipment can be purchased from a local supplier, The Swim Shop, at 457-1920.



(C) 431-1441

(E) <u>admin@makoaquaticsclub.com</u> or travano.mcphee@gmail.com

SWIM FEES

	Learn to Swim	Improve your Stroke	Junior Competitive	Senior Competitive	Away Swimmers	Adult Swimmers
Term Fees	\$400	\$400	\$380	\$380		
Annual Fee					\$150	
Monthly Fee						\$100
Bahamas Aquatics		\$25	\$25	\$25	\$25	
Annual Fee						
Strength and			\$125	\$125		
Development						
Annual Fee						
Individual	7	\$25	\$25	\$25	\$25	
Membership	al.	WAD.				
Application Fee	7	17	4			
(Parent(s))						

^{*}ALL outstanding fees but be paid before the start of the new year. Fees are subject to change.

LEARN TO SWIM

March 7, 2022 – May 27, 2022 Fees Due: March 4, 2022

IMPROVE YOUR STROKE

Term 1: August 30, 2021 – November 5, 2021 Fees Due: August 30, 2021

Term 2: January 3, 2022 – March 11, 2022 Fees Due: January 3, 2022

Term 3: March 14, 2022 – May 20, 2022 Fees Due: March 11, 2022

JUNIOR AND SENIOR COMPETITIVE

Term 1: August 30, 2021 – December 31, 2021 Fees Due: August 30, 2021

Term 2: January 4, 2022 – March 31, 2022 Fees Due: January 4, 2022

Term 3: April 1, 2022 – Nationals Fees Due: April 1, 2022



(C) 431-1441

(E) <u>admin@makoaquaticsclub.com</u> or travano.mcphee@gmail.com

Summer Program – Schedule and costs will be announced at the end of Term 3.

MEET FEES

There will be swim meets during the year. The Head Coach will advise when your swimmer will participate and the events he/she will swim. Meet entry fees are the responsibility of the parent and/or guardian. The fees are non-refundable and should be paid within a reasonable time frame after the meet. Previous meet fees must be paid before the swimmer is entered into the next swim meet.

If your swimmers is unable to participate in a meet, please send an email 1 week before the scheduled meet date.

