

Welcome to Jaguar Aquatics!

We are glad to have your athletes back in the water for the 2016-17 Short Course season!

In this packet, you will find:

- 2016-17 Short Course Returning Member Registration Form
- 2016-17 Short Course Parent Contact
- 2017 USA Swimming Registration Form

We will be utilizing an online platform called TeamUnify for some of our registration process this season. Please complete the attached forms and return to a member of the coaching staff **by Wednesday**, **September 28**. After we receive your registration forms, you will be sent an e-mail verification e-mail from TeamUnify, where you can set up your online account. Please keep in mind that you will not be able to enter your athlete into meets until this process is completed.

Thank you!

The Jaguar Aquatics Coaching Staff

Jaguar Aquatics 2016-17 Short Course Returning Member Registration Form

| Primary Online Accoun | t Holder Inf | ormation | | | | | |
|--|---------------------------------|-------------------|-----------------|--------------|-------------------------|--|--|
| First Name | Last Name | | Login E-mail | | Relationship to Athlete | | |
| | İ | | | I I | | | |
| Address | | Cit | у | Zip | Home Phone | | |
| Athlete 1 Information | | | | | 1 | | |
| Legal First Name | Midd | ddle Initial Leg | | al Last Name | Preferred Name | | |
| | | | | | | | |
| Birth date | Age | (| Gender | Grade | T-Shirt Size | | |
| Athlete 2 Information | | | | | | | |
| Legal First Name | Legal First Name Middle Initial | | Legal Last Name | | Preferred Name | | |
| | | | | | | | |
| Birth date | Age | (| Gender | Grade | T-Shirt Size | | |
| Billing Information (All invoices will be e-mailed unless otherwise requested) | | | | | | | |
| Bill to | | E-mail (Required) | | | | | |
| Home Phone | | Cell Phone | | | Work Phone | | |
| Street | | Citv | | | Zip | | |

| ✓ | Training Group | First Month | Team Fee (Annual or Seasonal) | Monthly Training Fees | Meet Entry Fees Per Athlete |
|---|-----------------|----------------|----------------------------------|--------------------------|--------------------------------|
| | Bronze | \$123 | \$125 or \$75 | \$60 | \$20-\$30/meet |
| | Silver Option 1 | \$128 | \$125 or \$75 | \$65 | \$20-\$30/meet |
| | Silver Option 2 | \$155 | included | \$90 | included |
| | Gold | \$160 | included | \$95 | included |
| | Gold Elite | \$165 | included | \$100 | included |
| | Senior | \$170 | included | \$105 | included |

| For Office Use: | | | | | | |
|-------------------|--|--|--|--|--|--|
| Date Received: | | | | | | |
| Added to TU: | | | | | | |
| Added to Billing: | | | | | | |
| USA Registered: | | | | | | |

Jaguar Aquatics

2016-17 Short Course Returning Member Parent Contract

Please read each section completely and carefully.

The commitment for the Short Course Season is September 2016 through March 2017.

Fee Schedule:

1. The 2016-17 fees per athlete are:

| Training Group | g Group First Team Fee Month (Annual or Seasonal) | | Monthly Training Fees | Meet Entry Fees Per Athlete | |
|-----------------|---|---------------|--------------------------|--------------------------------|--|
| Bronze | \$123 | \$125 or \$75 | \$60 | \$20-\$30/meet | |
| Silver Option 1 | Option 1 \$128 \$125 or \$75 | | \$65 | \$20-\$30/meet | |
| Silver Option 2 | \$155 | included | \$90 | included | |
| Gold | \$160 | included | \$95 | included | |
| Gold Elite | old Elite \$165 included | | \$100 | included | |
| Senior | nior \$170 included | | \$105 | included | |

- 3. The 2017 Seasonal USA Registration/Insurance Fee is **\$63 per athlete** and is included in the first month fees
- 4. The 2016-2017 Short Course Annual Registration Fee is **\$125 per family** or you have the option of paying a Seasonal Registration fee of **\$75 per family** for Bronze and Silver 1.
- 5. For Bronze, Silver 1, Silver 2, Gold, and Gold Elite, the 2016-17 fees are divided into 6 payments beginning October 1, 2016 and continuing through March 1, 2017. Senior team fees are divided into 3 payments beginning October 1, 2016 and continuing through December 1, 2016. Invoices will be processed on the first of the month. Training and meet entry fees are included in the monthly fees for Silver 2, Gold, Gold Elite, and Senior Teams. Meet entry fees will be billed on the invoice after each meet for Bronze and Silver 1. Silver Team members cannot change billing path after registration forms have been turned in to billing.
- 4. All invoices will be e-mailed unless otherwise requested by customer.
- 5. All incurred fees are due upon receipt of statement. If your fees are not paid in a timely manner, your swimmer's membership may be inactivated until payment is received. In addition, swimmers will not be registered in swim meets, including championships.
- 6. There is a \$25.00 fee for any checks returned for insufficient funds.
- 7. Swimmers are not allowed to come "in and out" of the program during the season. For example, a family may not pay just for April and May, then quit swimming for June and return in July.
- 8. If a swimmer chooses to enter a meet and then does not swim at the meet, they are responsible for paying for the entry fees.

Volunteer Requirements

- 1. Each family must be represented at at least **three different sessions** during our December Invite (December 9-11, 2016 and at at least three different sessions during our February Invite (February 3-5, 2017). Two people at one session only counts toward being represented at one session.
- 2. At a minimum, each family only needs to have one person work the session, but additional family members are welcome to volunteer during the same session as it takes about 50 to 75 people to successfully run one session.
- 3. There will be a **\$50 per session fine** assessed to your account if you fail to work any number of sessions under the required three sessions per hosted swim meet.
- 4. If a family works four sessions, they will receive a **\$25 credit**. If a family works **five sessions**, they will receive a **\$50 credit**. The family's account must be current to receive any credits.
- 5. Senior Swimmers can count for volunteer requirements, but not towards credits.
- 6. Fines and Credits will be assessed in the January and March invoices.

(continued on next page)

If a swimmer wishes to withdraw from the program, he/she must submit a resignation email sent by the resigning swimmer's parent or guardian to a member of the coaching staff. Please copy Kelsey Wasylk at kewasylk@iupui.edu. Appropriate training fees will be billed through the end of the month.

Swimmer and Parent Conduct

Club members have an obligation to act as guests while in the Natatorium. Every member of the club needs to do everything possible to respect this privilege. Any damages to the property may result in financial liability of the swimmer's parents. Any damage may also result in the swimmer being asked to leave the team permanently. Parents and/or siblings are not allowed on the pool deck during practice unless it is an emergency.

Photographs & Video

I give permission to the IU Natatorium for the free use of my likeness and that of my child or ward, in connect with any broadcast, telecast, print media account, or other publicity of or generated by the IU Natatorium.

IU Release Statement

In consideration of my child's or ward's participation in Jaguar Aquatics, I, intending to be legally bound, do hereby for myself, my spouse (if any), my child, or ward, and my child's or ward's executors and administrators, waive, release, hold harmless, and forever discharge Indiana University, IUPUI, its agents, employees, representatives and sponsors of and from any and all claims, damages, or expenses, including without limitation, any claims, damages or expenses for loss, damages or injury to my child's or ward's person or property, arising or alleged to arise from any act or omission of Indiana University, IUPUI, its agents, employees, representatives and sponsors; irrespective of whether such claim, damage, or expense is caused or alleged to be caused by the sole, joint, several or comparative negligence or any other breach of duty or by aforementioned organization and individuals, or any one of them. I also give permission to the aforementioned organizations for the free use of my likeness and that of my child or ward, in connect with any broadcast, telecast, print media account, or other publicity of or generated by the IUPUI Sport Complex.

Before signing this contract, please make certain that you completely understand each section as it applies to you and your family.

| I may | I may void this contract within 30 days of signing by notifying the Coaching Staff in writing. After that date I agree to the conditions outlined above. | | | | | |
|-------|--|--------------|------|--|--|--|
| - | Signed | Printed Name | Date | | | |



2017 ATHLETE REGISTRATION APPLICATION

LSC: IN (Indiana): membership valid 9.1.16-12.31.17

| PLEASE PRINT LEGIB LA | LY • COMPLETE AST NAME | E ALL INFORMATION | | AL FIRST N | IAME | | MIDDLE NAME | |
|---|---------------------------|---|-------------------|---------------|------------------------------------|--------------------|--|--------------------|
| | | | | | | | | |
| PREFERRED I | NAME | DATE OF BIRTH (MO/I | DAY/YR) SEX (M/F) | AGE | CLUB CODE | NAME OF C | LUB YOU REPRESENT | |
| | | | | | | | | |
| (Bill, Beth, Scooter, Liz, Bo GUARDIAN #1 LA | | GUARDIAN #1 FII | RST NAME | | If not affiliated GUARDIAN #2 LAST | with a club, enter | "Unattached" GUARDIAN #2 FIRST | NAME |
| | | | | | | | | |
| | | MAILING ADDRES | SS | | | | | |
| | | | | | | U.S. C | ITIZEN: YES | NO |
| | CITY | | STATE | | ZIP CODE | | | |
| | | | | | _ | ARI | E YOU A MEM | BER OF |
| AREA CODE | TELEPHO | NE NO. | FAMILY/HO | USEHOLE | E-MAIL ADDRESS | | OTHER FINA | |
| | | | | | | FEDE | RATION? YES NO |) |
| | OPTIONAL | | MAKE CHE | CK PAYAB | LE TO: | IF YES | S, WHICH FEDERATION: | |
| DISABILITY: A. Legally Blind or Visually I | | .ND ETHNICITY (You may o two choices): | Your clu | b unless | Unattached (Ind | liana | | |
| ☐ B. Deaf or Hard of Hearing | Q. Bla | ick or African American | Swimmir | ng) | <u> </u> | | | |
| C. Physical Disability such a amputation, cerebral pals | sy, 🔲 S. Whi | ite | MAIL APPL | ICATION 8 | & PAYMENT TO: | | 2017 REGISTRA | TION FEE |
| dwarfism, spinal injury, mobility impairment | | panic or Latino ierican Indian & Alaska Native | YOUR CI | LUB | | | Sept. 1, 2016 through | - |
| ☐ D. Cognitive Disability such | as | me Other Race | If unattac | | | | USA Swimming Fee | \$56.00 \$7.00 |
| severe learning disorder, autism | | itive Hawaiian & Other Pacific ander | l maiana c | | າg e, Suite 410 | | TOTAL DUE | \$63.00 |
| HIGH SCHOOL STUDENTS – Ye | ear of high school gradu | uation: | Indianap | • | • | | | - |
| YEAR LAST REGISTERED: | | | USA SWIMMING CLU | JB IN 2016. [| NTER THAT | | you would like to learn more ab ng Foundation's initiatives | out the USA |
| CLUB CODE:LSC C | | | | | | Check it | you would like to receive the el ng Newsletter (must be 13 year | |
| | | | | | | ☐ 9MIMMI | ng newsieller (must be 13 year | s or age or order) |
| SIGN HERE x | | | | | | | | |
| | NATURE OF ATHLE | TE, PARENT OR GUAI | RDIAN | | DATE | REG. DATE/LS | C USE ONLY | |

<u>This form is to be returned to YOUR CLUB with payment.</u> Your club will send one payment to our office for all registrations submitted. Only if you are a true unattached athlete (you do NOT belong to a club) should you send this completed form with payment directly to our offices.

Birth Certificate Copy Needed: ****Since 2010, Indiana Swimming has required all 18 and younger swimmers to submit a COPY of their birth certificate to their club registrar. Swimmers who do not submit a copy of the birth certificate and subsequently swim in meets will be assessed a \$100 per meet fine for non-compliance/confirmation of age. Once Indiana Swimming has confirmed the swimmer's membership with date of birth confirmation, the swimmer will NOT have to re-submit. If you are unsure if Indiana Swimming has your date of birth confirmed from a previous year's membership, please e-mail Michele@inswimming.org. **Indiana Swimming does accept other forms of date of birth confirmation. Please see CLUB FORMS section of the website for the Birth Certificate Requirements document.

QUESTIONS regarding your club practices, times, fees, ect need to be directed to your club, not our offices.

This form should be completed for EVERY ATHLETE MEMBER of Indiana Swimming. Completing these forms is a requirement of USA Swimming and gives your club liability insurance and your swimmer some secondary accident insurance. Clubs should keep these signed forms in the club files. Clubs are asked to submit team management software files (Team Manager or Team Unify) to register the athletes. Please e-mail michele@inswimming.org for questions/details.