



# POCONO FAMILY YMCA

## TAKE YOUR MARK SWIM TEAM

FALL (1) 2018 REGISTRATION

(September 4 – October 25, 2018)

(REGISTRATION OPENS 8/14/18)



**Boys and Girls in the following Ages: 12 & Under** - Swimmers are required to be able to swim 25 yards freestyle and 25 yards backstroke without flotation or assistance and pass simple entrance test.

**Family Info: (MAKE SURE TO FILL OUT BOTH SIDES OF REGISTRATION FORM)**

Family Name: \_\_\_\_\_ (Not Swimmer Name) Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Alt Phone: \_\_\_\_\_ Email: \_\_\_\_\_ **(REQUIRED)**

Fathers Name: \_\_\_\_\_ Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ Cell#: \_\_\_\_\_

Mothers Name: \_\_\_\_\_ Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ Cell#: \_\_\_\_\_

**>PRACTICE SCHEDULE: (PRACTICE TIMES ARE SUBJECT TO CHANGE DUE TO ENROLLMENT AND SCHOOL SCHEDULES)** Please indicate below your intended practice attendance to help us schedule coaches effectively.

|  |   |
|--|---|
| <input type="checkbox"/> <b>Stroudsburg Intermediate School:</b><br>Tues & Thurs (PM): 6:30-7:15pm<br>(Program Limit 40)<br><br><input type="checkbox"/> <b>Pocono Mountain West:</b><br>Tues & Thurs (PM): 6:30-7:15pm<br>(Program Limit 40)<br><br><input type="checkbox"/> <b>Lehman Intermediate School:</b><br>Tues (6:30-7:15) & Thurs (PM): 6:30-7:15<br>(Program Limit 40) | <p><b>12 &amp; Under Swimmers Only</b></p> <p><b>Performance Requirements:</b> Take Your Mark Swimmers must be able to swim 25 yards of free (front crawl stroke) with rotary breathing &amp; 25 yards of backstroke</p> <p><b>FLOATATION DEVICES ARE NOT PERMITTED</b></p> |
|--|---|

|  |   |
|--|---|
| 12 & Under: YMCA MEMBER <b>\$65.00</b> _____ | 12 & Under: NON -YMCA MEMBER <b>\$95.00</b> _____ |
|--|---|

**YMCA MEMEBERSHIP IS NOT REQUIRED TO JOIN TAKE YOUR MARK SWIM TEAM: YMCA Membership fees are not included in Team Fees.**

**>Office Use Only:** - Please indicate membership expiration on the back page for each swimmer.

Membership Verified: \_\_\_\_\_ (init) Amt Collected: \_\_\_\_\_ (Cash) (Check) (Credit Card)

Receipt #: \_\_\_\_\_ (Monthly Bank Draft) \_\_\_\_\_

**MAKE SURE EACH CHILD IS LISTED BELOW AND ALL INFORMATION IS COMPLETED.**

|           | Swimmer Name /s<br>First, Middle Initial, Last | YMCA<br>Membership<br>Expiration Date<br>(Office Use Only) | Date of<br>Birth | T-Shirt<br>Size | Sex<br>F or M | Medical Conditions or Special Notes |
|-----------|--|--|------------------|-----------------|---------------|-------------------------------------|
| <b>EX</b> | Joseph W. Smith (Example)                      | 4/06   | 10/15/89         | XL              | M             | None                                |
| <b>1</b>  |  |  |                  |                 |               |                                     |
| <b>2</b>  |  |  |                  |                 |               |                                     |
| <b>3</b>  |  |  |                  |                 |               |                                     |
| <b>4</b>  |  |  |                  |                 |               |                                     |
| <b>5</b>  |  |  |                  |                 |               |                                     |
| <b>6</b>  |  |  |                  |                 |               |                                     |
| <b>7</b>  |  |  |                  |                 |               |                                     |
| <b>8</b>  |  |  |                  |                 |               |                                     |

**>NEW SWIMMERS / TRY OUT REQUIREMENTS:**

**ALL NEW SWIMMERS ARE REQUIRED to TRY-OUT.** To **SCHEDULE a TRY-OUT** go online **WWW.TRYOUT.PFYSWIM.ORG**

**> FINS & EQUIPMENT:**

Each swimmer is required to purchase fins, a practice suit and racing goggles. All equipment can be purchased through our online store <http://store.pfyswim.org>. For Equipment list go to our Team Web Site and go to the Practice & Meet Equipment List. A List can be found online and will be sent out by email.

**>COMMUNICATION:**

We use our team web site for a large part of our communication. [WWW.PFYSWIM.ORG](http://WWW.PFYSWIM.ORG) All team information as well as any practice or event changes will be posted on the web site.

**>CHECKS:**

Make all checks payable to the **POCONO FAMILY YMCA**

**>CONSENT & AUTHORIZATION:**

IN CONSIDERATION OF ACCEPTANCE OF MY APPLICATION FOR FALL CONDITIONING, I INTEND TO BE LEGALLY BOUND, NO ONLY FOR MYSELF BIT ALSO FOR MY HEIRS, MY EXECUTORS AND MY ADMINISTRATIONS. IN SIGNING THIS RELEASST FROM LIABILITY, I WAIVE AND RELEASE EVERYONE CONNECTED WITH THIS COURSE FROM ANY AND ALL LIABILITY WHICH MAY ARISE FROM THIS COURSE.

**>REFUND POLICY** – all requests for refunds must be submitted in writing

One month before the start of the program - 90% cash / 100% credit, Two weeks before the start of the program – 75% cash / 100% credit, One week before the start of the program -- 60% cash / 80% credit, After the start of the program - system credit with a Doctor's note.

**>PARENT / GUARDIAN SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_