

**SEMS SWIM CLUB BILLING AGREEMENT/REGISTRATION  
2009 SPRING/SUMMER – LONG COURSE  
www.semsswimclub.com  
PO Box 251243, Woodbury, MN 55125-1243**

**SEMS SWIM CLUB FEE SCHEDULE**

Below are the fees for our 2009 Spring/Summer Season. ***There are no month to month or partial season options.*** All fees are due upon registration. The fees may be paid in installments with a \$5 per month administration fee. The installment schedule can be found on our website or at time of **registration on Tuesday, March 10, 2009 at Woodbury Senior High, 6:00-7:30pm (parent meeting 6:45-7:15pm).** Please note—if you choose to pay by installment, your first month installment will include the USA/MSI fee (as applicable) and the meet fee deposit.

<b>GROUP</b>	<b>START DATE</b>	<b>SEASON FEE</b>	<b>ANNUAL USA SWIM MEMBERSHIP</b>	<b>MEET FEES DEPOSIT</b>	<b>TOTAL FEE w/o &amp; with \$53 (see**below)</b>	<b>FIRST INSTALLMENT (see**below)</b>
<b>Hammerhead Sharks (Session A)</b>	April 6	\$170.00	\$53.00	N/A	\$170 or \$223	N/A
<b>Mako Sharks (Session A)</b>	April 6	\$190.00	\$53.00	\$25	\$215 or \$268	N/A
<b>Hammerhead Sharks (Session B)</b>	June 1	\$170.00	\$53.00	N/A	\$170 or \$223	N/A
<b>Mako Sharks (Session B)</b>	June 1	\$190.00	\$53.00	\$25	\$215 or \$268	N/A
<b>Tiger Sharks</b>	April 6	\$505.00	\$53.00	\$50.00	\$555 or \$608	\$181.25 or \$234.25
<b>Great White Sharks</b>	April 6	\$515.00	\$53.00	\$50.00	\$565 or \$618	\$183.75 or \$236.75
<b>Pre-Senior</b>	April 6	\$535.00	\$53.00	\$50.00	\$585 or \$638	\$188.75 or \$241.75
<b>Senior Red</b>	April 6	\$555.00	\$53.00	\$50.00	\$605 or \$658	\$193.75 or \$246.75
<b>Senior Blue</b>	April 6	\$575.00	\$53.00	\$50.00	\$625 or \$678	\$198.75 or \$251.75

- ***\*\*If you participated in the Fall/Winter 08-09 season you may have already paid the annual \$53 USA Swim Membership fee. The USA membership fee is an ANNUAL fee.***
- Minnesota Swimming (MSI) charges \$53 USA Swim Membership Fee to register each swimmer for competitive and insurance purposes. Every SEMS swimmer must be registered before participating in swim practices.
- There are competition fees for each meet you choose to attend. Meet fees vary based on the location and number of entries. Fees range from \$10 - 40 per meet. Once entered into a meet, there are no refunds. The total season fee includes the MEET DEPOSIT FEE of \$25 per session for MAKO or \$50 per season meet fees for TIG, GRW, PS, SR, SB groups which is for meet fees during the season and is non-refundable if not used during the spring/summer season.
- The first payment is due at time of registration.
- Installment payments include a \$5/monthly payment fee.

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**Swimmer information:**

Legal name Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
Initial \_\_\_\_\_

Preferred name \_\_\_\_\_

Gender M / F Date of birth \_\_\_/\_\_\_/\_\_\_ Age\_\_\_ US Citizen? Yes or No Dual Citizen? Yes or No

Ethnicity (please circle) African American Asian or Pacific Islander Caucasian Hispanic Native American Other Decline

Parent/Guardian name(s) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone Number \_\_\_\_\_

**E-Mail Address for Billing:** \_\_\_\_\_

\*Please note – you will not receive a mailed bill unless specifically requested. Bills will be sent to this e-mail address.

**E-mail address for notifications** \_\_\_\_\_

\*Please note – special notifications, practice changes, meet information, etc. are sent via e-mail.

Our sponsor Mutual of Omaha publishes our newsletter which includes promotional information about their products. We supply our club roster home and email for this purpose.

Should you not wish to receive this newsletter, sign here: \_\_\_\_\_

**Phone Number for EMERGENCY Contact (child injury or pool closure): List: Mom's Work, Dad's Cell, etc.**

1. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Name \_\_\_\_\_

2. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Name \_\_\_\_\_

3. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Name \_\_\_\_\_

**Emergency Contact Phone Numbers other than parent or guardian:**

Name \_\_\_\_\_ Home \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Does your swimmer have any **health concerns or allergies** that the coaches should be aware of: \_\_\_yes \_\_\_no (if yes, please explain) \_\_\_\_\_

In case of emergency your child will be transported to the nearest hospital and your Primary Doctor will be notified.

Primary Doctor \_\_\_\_\_ Clinic \_\_\_\_\_

Phone # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Clinic # \_\_\_\_\_

**Photo Waiver:** We will be featuring swim members on our website and newsletter. If you do not wish to have your child's picture published, sign here \_\_\_\_\_

**Signature of Parent/Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

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**INSTALLMENT SCHEDULE**

<b>GROUP</b>	<b>TOTAL SEASON FEE</b> w/o & with \$53 (see**below)	<b>APRIL 6</b> w/o & with \$53 (see**below)	<b>MAY 8</b>	<b>JUNE 8</b>	<b>JULY 8</b>
<b>Tiger Sharks</b>	\$555 or \$608	\$181.25 or \$234.25	\$131.25	\$131.25	\$131.25
<b>Great White Sharks</b>	\$565 or \$618	\$183.75 or \$236.75	\$133.75	\$133.75	\$133.75
<b>Pre-Senior</b>	\$585 or \$638	\$188.75 or \$241.75	\$138.75	\$138.75	\$138.75
<b>Senior Red</b>	\$605 or \$658	\$193.75 or \$246.75	\$143.75	\$143.75	\$143.75
<b>Senior Blue</b>	\$625 or \$678	\$198.75 or \$251.75	\$148.75	\$148.75	\$148.75

- **The total season fee shown includes the Meet Deposit Fee and the total with the \$53 USA Membership Fee. *\*\*If you participated in the Fall/Winter 08-09 season you may have already paid the \$53 USA Swim Membership fee. The USA membership fee is an ANNUAL fee.***
- **The first payment is due at time of registration.**
- **Installment payments include a \$5/monthly payment fee.**

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**Payment Selection – Cut off and turn in with your registration form  
Keep the top portion for your reference**

**Swimmers Name** \_\_\_\_\_

**Parents Name** \_\_\_\_\_

**Group you are swimming in (circle one):**

Hammerhead Sharks Session A

Mako Sharks Session A

Hammerhead Sharks Session B

Mako Sharks Session B

Tiger Sharks

Great White Sharks

Pre-Senior

Senior Red

Senior Blue

**Payment Selection (circle one):** Up front payment in full - *payment attached* / Installments - *first payment attached*

**The following forms are required to register:**

- Billing Agreement/Registration Form
- Payment Selection Form with full payment or first installment
- Code of Conduct Form
- Waiver and Release Form
- Emergency Medical Authorization Form

**IF swimmer swam Fall/Winter 08-09,**

Mail check along with forms listed to the left.

On Billing Agreement/Registration Form:

Required information: swimmer's full name and signature at bottom of form. Please check all information on your website account to be sure it is correct or make current changes. Hit save changes. On form, please mark " on-line".

# SEMS CODE OF CONDUCT

## GENERAL CODE OF CONDUCT RULES:

1. Members of SEMS Swim Club are expected to conduct themselves with honor and treat all others with respect.
2. Disrespectful or indiscreet behavior, including but not limited to jokes, comments, or the use of demeaning terms toward another individual will not be tolerated.
3. We are guests of the facilities we use and visit. Abusive or neglectful behavior is unacceptable.
4. It is the responsibility of each swimmer to make every effort to avoid guilt by association with such activities at any time during the year.
5. Guilt by association includes a failure to communicate problems to the coaching staff. It is your duty to act when improper behavior is witnessed. Small issues can become large problems when left unaddressed.
6. The consumption or purchase of alcohol, smoking or chewing tobacco, or use of any other illegal drug or USOC banned substance of any kind will not be allowed. In addition, any team member found or suspected to be in the presence of others (regardless of team affiliation) partaking in any of the above activities may be subject to the same punishments.

## VIOLATION OF THE CODE OF CONDUCT RULES

At the discretion of the Head Coach and the Disciplinary Committee, any one or all of the following penalties may be applied:

1. If the violation occurs at a competition, the swimmer may be scratched from the meet.
2. Swimmer may be sent home immediately from practice or meet and any expense or repair will be swimmer's responsibility.
3. Swimmer may be suspended from participation in future competitions for a period of time to be deemed appropriate.
4. Swimmer may be suspended from the team until the swimmer and parents have had a conference with the Head Coach and appropriate disciplinary actions have been implemented.
5. Swimmer's membership in South East Metro Sharks may be terminated.

I have read the above code of conduct. I understand and accept responsibility for my actions and I recognize that participation in SEMS is a privilege that may be revoked as determined by the Head Coach and the Disciplinary Committee.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**SEMS SWIM CLUB**

**WAIVER AND RELEASE**

In consideration of allowing my minor child to participate in or for the Southeast Metro Sharks (“SEMS”) swim club and program, the undersigned, on behalf of the minor child and his or her parents or legal guardians, and their family, heirs or assigns, does hereby waive, release and forever discharge SEMS, its employees, officers, members, agents or assigns (the “Released Parties”), from any and all responsibility or liability for injuries or other damages arising out of or in connection with the undersigned child’s participation in the swim club that is caused by the Released Parties’ negligence, whether passive or active, or by the Released Parties’ acts or omission that are not intentional, willful or wanton.

The undersigned further agrees on behalf of the minor child and his or her parents or legal guardians, and their family, heirs or assigns, to indemnify the Release Parties from any damages and costs arising from or connected with any claims made by or on behalf of the participant as a result of the participant’s participation in the swim club.

I understand that swimming is a dangerous or hazardous activity, and I further understand and acknowledge that there are risks inherent in the sport of swimming, including but not limited to paralyzing injury and even death. On behalf of my minor child, I expressly assume and accept all risks of injury or death.

By signing this waiver and release, the undersigned acknowledges that he or she has read and fully understands its contents and significance.

**CAUTION: THIS IS A RELEASE - - READ BEFORE SIGNING**

Date: \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
PRINT NAME OF PARTICIPANT

**EMERGENCY MEDICAL AUTHORIZATION**

As the parent or legal guardian of the participant in or for the Southeast Metro Sharks (“SEMS”) swim club, I hereby give my consent for emergency medical care by a qualified and licensed physician, hospital or clinic or other appropriate medical provider. This care may be given in the event the participant’s condition endangers the child’s life, or may cause disfigurement, physical impairment or undue discomfort if delayed.

As the parent or legal guardian of the participant, I agree to pay for all costs associated with medical care and transportation for the participant.

This consent is signed for the sole purpose of authorizing medical treatment under emergency circumstances in the absence of the participant’s parent or guardian.

Date: \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
**SIGNATURE OF PARENT/GUARDIAN**

\_\_\_\_\_  
**PRINT NAME OF PARTICIPANT**