



# 2021 Oro Valley Swim Team – Policy Agreement

	Initial Here
I have read and understand the swimmer expectations.	
I have read and understand the parent expectations.	
I have read the Waiver of Liability and Disclaimer/Medical Release and give my consent for my child/children to participate with the Oro Valley Swim Team.	
I have read the COVID restrictions and give my consent for my child/children to participate with the Oro Valley Swim Team.	
I have read and understand how the team communicates.	
I have read and understand the team policy regarding the use of my swimmer's name and picture.	
*I understand that my family will be required to complete 6 volunteer credits, or we will be billed at a rate of \$15/credit that wasn't fulfilled.	
*I understand that volunteer credit fees must be paid before registering for the next SAAA season.	
*I understand that my swimmer is expected to compete in at least 3 summer meets and attend SAAA Championships.	
I understand that there is a non-refundable fee of \$110 per swimmer.	
I understand that once the season begins there are no refunds of team or season fees.	

\*Subject to having Meets

Parent Name (Print): \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Swimmer's Name: \_\_\_\_\_

Swimmer's Name: \_\_\_\_\_

Swimmer's Name: \_\_\_\_\_