



## 2018 Long Course Swim Season Registration New and Returning Families!

Alligator Aquatics Inc. is a privately run, not for profit, USA swimming swim team. Athletes from all over the northwest suburbs are a part of our program. A tradition of competitive swimming success continues under the direction of Head Coach Mary Ruffin, and a highly motivated staff. Over two thirds of our swimmers compete in Local, State & National Championship meets! In recent years we have had 2 repeating State Champions at the ISI State Championships, Multiple USA Sectional and Junior National Qualifiers, a Junior National Champion in two events and two swimmers who competed in the 2008, 2012 and 2016 Olympic trials! In addition we had one swimmer compete in the 2016 Paralympic trials and is currently ranked in the top 20 in the world in 4 events! This success comes from our determination to put the athlete first. We are here for them!

### Our commitment to you:

- We are dedicated to developing athletes that grow in commitment, integrity, and sportsmanship through training.
- We are dedicated to keeping our coaches educated in the sport of swimming on a local, state, and national level. All coaches are USA swimming and ASCA certified.
- The Alligator families have a history of developing lifelong friendships that carry way beyond the pool.
- We provide ongoing opportunities for all athletes to achieve their own personal goals. No goal is too small or too big!

Our team has experienced quite a bit of growth and success over the years! We are home to age group swimmers, from many different grade schools and swimmers from all D214 high schools – and beyond! Our college swim team placement rate is 98% for all those wishing to continue swimming in college. We are currently represented at Ohio State, Oshkosh, Saint Louis University, Southern IL, U of Illinois, Rose-Hulman, Illinois Wesleyan, Mckendree, Carroll University, Michigan State, Ball State, Case Western Reserve, Wright State University, and DePauw University.

Success in our program comes from a determination to provide the most current skills to our athletes, an open door of communication, and a vision of excellence. As a team (parents included), working together, we will continue our tradition of excellence!

Alligator Aquatics is open to swimmers ages 5 and up. *They must be able to swim 25 yards of both freestyle and backstroke efficiently.* Through the use of a progressive program all swimmers, whether novice or advanced, will receive the coaching and training necessary to guide them to their full potential.

### **Alligator Family Requirements:**

- ❖ All families are needed to help run our home meets and to time at any away meets they attend.
- ❖ Participate in the pool, and in the stands, with good sportsman-like conduct.

### **Parent meeting – Required for New parents!**

***To be covered – team policies, procedures and expectations, plus, review of Meet Sign-up and website.***

***Monday, April 11th, 2018 at Saint Viator H.S. 6:00-7:00pm***

***We need you there so YOU know what is going on!***

***Location: Saint Viator Commons – enter through the main entrance and turn left.***

# Alligator Aquatics

## 2018 LONG COURSE FEE SCHEDULE

(These fees do NOT include the required ISI registration fee, transfer fees (if needed) see note).

**Payment plans are available. Partial season fees include a \$60 admin fee**

### Spring/Summer Fee Schedule

<u>Group</u>	<u>Dates</u>	<u>Fee</u>	<u>Pmt plan</u>
<b>Green</b>	<b><u>April 12th - July 20th</u></b>	<b>\$300.00</b>	<b>\$120.00(3)</b>
Spring	April 12th - June 3rd	\$180.00	NA
Summer	May 15th - July 20th	\$230.00	\$145.00(2)
<b>Silver</b>	<b><u>April 12th - July 20th</u></b>	<b>\$420.00</b>	<b>\$160.00(3)</b>
Spring	April 12th - June 3rd	\$230.00	NA
Summer	May 14th - July 20th	\$300.00	\$180.00(2)
<b>Gold</b>	<b><u>April 12th - August 8th</u></b>	<b>\$690.00</b>	<b>\$250.00(3)</b>
Spring	April 12th - June 3rd	\$325.00	NA
Summer	May 14th - August 8th	\$498.00	\$279.00(2)
<b>Blue</b>	<b><u>April 12th - August 8th</u></b>	<b>\$750.00</b>	<b>\$270.00(3)</b>
Spring	April 12th - June 3rd	\$345.00	NA
Summer	May 14th - August 8th	\$562.00	\$311.00(2)
<b>Senior</b>	<b><u>April 3rd - August 8th</u></b>	<b>\$855.00</b>	<b>\$305.00(3)</b>
Spring	April 3rd - June 3rd	\$430.00	NA
Summer	May 1st - August 8th	\$675.00	\$367.50(2)
<b>X-Treme</b>	<b><u>April 3rd - August 8th</u></b>	<b>\$930.00</b>	<b>\$330.00(3)</b>
Summer	<u>May 1st - August 8<sup>th</sup></u>	<b>\$735.00</b>	<b>\$397.50(2)</b>
<b>College &amp; post grad</b>	<b><u>May 1st, 2018 to August 8th, 2018</u></b>	<b>\$75.00</b>	NA
<b>Masters</b>	<b><u>May 15<sup>th</sup> - August 16<sup>th</sup>, 2018 (3-4 practices per week)</u></b> we will be at St Viator and Prospect.	<b>\$300.00</b> must have USM card	NA

**Illinois Swimming registration (ISI):** All swimmers are required to be registered with USA Swimming in order to participate with the team. **If you swam with the Alligators during the Short Course Season, you are already registered and no further action is required.** If you are new to USA Swimming, you must complete a registration form and turn it in our registrar. The \$75 fee will be added to your registration fee and billed in addition to the registration fee. The form for athlete ISI registration is available at [www.ilswim.org](http://www.ilswim.org). **You cannot practice or compete if you are not registered with Illinois Swimming – this is our insurance!**

**Note to College** – fee **does not** included ISI registration and Swimmers attending college locally will have an additional fall/winter fee that will be listed in fall registration packet. College swimmers are expected to help and/or attend the home Alligator meet.

**Note to ALL** - April practice times are worked around the water polo team at St. Viator. Practice times after July 23rd will be reduced due to the championship season. Practices will be listed on the website calendars.

## Group Descriptions

Swimmers 8 and under must be able to complete 25 yards free and back efficiently.

10 and over must complete 50 yards free and back.

### Age Group Team

**Green Gators:** Novice swimmers ages 5-8 yrs. Practices will be 85% stroke correction and 15% training. This level is pre-competitive. Swimmers may swim in meets upon discussion and agreement with the coaches, however competition is not expected.

- 2 practices a week are recommended.

**Silver Gators:** Swimmers ages 9 and under. Practices will be between 30% - training and 70% stroke corrections depending on the swimmer's ability. This level is early-competitive. Attending the Alligator meets is all that is expected. Additional meets are optional and should be discussed with the coaches.

- 3 practices a week are recommended.

**Gold Gators:** Swimmers ages 10 and under, and 11 year olds newer to the sport of swimming. The focus in practice will be 40% stroke correction and 60% training. These swimmers should have grasped the basics of swimming and be legal in all four of the competitive strokes. This level is expected to attend one meet a month.

- 3 to 4 practices a week are recommended.

**Blue Gators:** Swimmers ages 11-12 (exceptions are rare, but considered by the head coach, for swimmers with unque circumstances. The focus in this group is age group appropriate conditioning. Progression through this group takes a swimmer from solid age group practices to more focused, age group competitive conditioning. Swimmers are expected to commit to training on a regular basis, as more advanced methods of training are introduced at this level. This level is expected to attend a minimum of one meet a month and any upper level swim meet for which a swimmer qualifies.

- 3 to 4 practices a week are recommended.

### Senior Team

**Senior Gators:** Swimmers ages 13 and over (exceptions are considered for swimmers with 11/12 age group state cuts and a high level of training integrity). Training at this level is more advanced over all. Swimmers in this training group will practice with a higher intensity. The focus in this group is to prepare/train swimmers for HS swimming, and for college swimmers desiring basic summer conditioning. These swimmers are expected to be mature, dedicated, responsible and dependable. Competing in the Alligator home meet and at least 1 additional meet in the LC season and any higher level meet qualified for.

- 5 practices a week are recommended

**X-Treme:** This group is for ages 13 and over, and by Head Coach approval only. In order to to move to X-Treme, athletes must have demonstrated a high level of training integrity, self-discipline, positive work ethic. Attendance is expected at 90% unless excused by the Head Coach. These swimmers are focused on reaching High School State and National level competitions, and a willingness to work towards that level is expected. Championship meet participation is required. On-going communication with the Coach Mary is required.

- Swimmers not holding true to the X-Treme standards will be placed in the Senior training group for a minimum of a 1 week period. Reassessment will be done at that time.
- 2 practice suits must be worn at all practices

**Please Note** ~ Swimmers age as of June 1<sup>st</sup> determines level placement. Level changes within the season are allowed **ONLY** with Head Coach approval. Fees will be adjusted accordingly. Each returning swimmer must register in the level assigned by the Head Coach. For new athletes, please sign up for the level that best suits your child. If you are unsure which level is most appropriate, please contact the Head Coach Mary Ruffin to discuss [headcoach@alligatoraquatics.org](mailto:headcoach@alligatoraquatics.org) . During the first week of practices all swimmers will be reviewed to assure their group placement is a good fit.

**Spring practices** for all groups will be held at St. Viator, Wheeling, and Prospect HS

**Summer practices** Saint Viator, Prospect, and Recreation Park – a few at Birchwood in Palatine

**Current Member Registration is strongly encouraged by March 15<sup>th</sup>**

Payment plans are available and will be an option during on-line registration. All payment plans must have final payment in by July 1<sup>st</sup>, 2018

**\*\*It is strongly recommended that you keep a credit card on file so your account is kept current. Meets cannot be entered into if your account is not current.**

**Discounts and Special Offers**

**1. Multiple Swimmer Discount (college swimmers excluded):**

Families with two or more swimmers registering for the FULL SEASON of their swimmers' levels will receive the following discount starting with the highest level of swimmer being #1, next level down is swimmer #2, and so on:

\$ 30.00 off registration fee for 2<sup>nd</sup> swimmer

\$ 60.00 off registration fee for 3<sup>rd</sup> swimmer

\$ 90.00 off registration fee for 4<sup>th</sup> swimmer

**2. Team T-Shirt & Swim Cap:**

Team t-shirts and team caps will be included only if registered by May 15th, 2018

- Liability/Medical Release Form – Hard Copy must be turned in for registration to be complete
- Mail your liability form to:

P.O. BOX 1582

ARLINGTON HEIGHTS, IL 60006-1582

**Questions**

Bring your questions to parent meeting or contact:

Head coach: **Mary Ruffin** 847-275-5571 – [headcoach@alligatoraquatics.org](mailto:headcoach@alligatoraquatics.org)

Membership Chairman: **Andy Topps** - [registrar@alligatoraquatics.org](mailto:registrar@alligatoraquatics.org)

Team President: **John Andrew** - [president@alligatoraquatics.org](mailto:president@alligatoraquatics.org)

## Meet Fees

**Regular Season Meets:** Swimmers will be charged **per event** entered. The charge will be as reflected in the meet packet supplied by the meet host. Relay events are on average charged \$3 per person. In addition, if a per person facility fee is charged by the meet host, that fee would be incurred as well. Meet host fees will always be noted in the meet packet on our website.

**Championship and Prelim-Final Meets:** Swimmers will be charged **per event** entered. Fees will be as listed in the meet packet supplied by the meet host. Relay only swimmers will have any surcharge charged to the team, passed on to them. Each participant of a championship meet (regional and state) will have a shirt order for them. This will be billed to your account and will cost approximately \$15.00.

## Team Communication

Our main form of communication is our web site [www.alligatoraquatics.org](http://www.alligatoraquatics.org). Your swimmer will also have a mailbox on deck at St. Viator during the season. They will be responsible for checking their box on a regular basis for team updates. We also use email and calling posts messages when needed. You will need to check for these on a regular basis for team urgent news.

## Team Suits – Speedo!!!

### We are a Speedo sponsored team – suits and caps must be speedo brand

Each swimmer is required to purchase a team suit from the swim team store in person or online. We have additional team apparel and equipment that will be available for you to order as well, all of which is available at discounted team rates. **On our website is the Gator shop** which will give you the convenience of purchasing from home.

Team apparel is also available at **The Swim Team Store**, 830 Seton Ct #9, Wheeling, IL 224-676-0344

## Home Meet Commitment

**Our home meet** is our **number one fundraiser** for this season. All families are required to work this meet regardless of whether or not their child is able to participate. This holds true for all USA teams! If unable to attend for extreme circumstances we do offer an opt-out fee of **\$90.00**. Please note, we do not want your money, we want your time and support of your child's team. We will also be asking for a food/drink donation in addition to your time. More details are available on the web as the meet approaches.

## Volunteer Commitment

Each family who attends an away meet is expected to time during the season. Timing assignments are based on the individual swimmers in the meet and the frequency they participate in meets. Timing at the championship meets is based on swimmers in the meets and the events/sessions in which they are swimming.

Along with working our home meet, we require all families to volunteer in a more day to day manner. Whether it is helping to run a pizza party or help run a fundraiser or organize a mini golf outing, there are plenty of opportunities that fit virtually any individual schedule or personal expertise. **Details are on the web.** We do offer an opt-out fee of **\$60.00**, but we would prefer your help if at all possible.

**Registration Form**  
**2018 Long Course Season**

*register online and then - fill out hard copy and turn in to registrar before 1<sup>st</sup> practice*

**Swimmer(s) Information**

First Swimmer

Second Swimmer

First Name: \_\_\_\_\_ MI: \_\_\_\_\_

First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Last Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Athletes Cell: \_\_\_\_\_

Athletes Cell: \_\_\_\_\_

Athletes email: \_\_\_\_\_

Athletes Email: \_\_\_\_\_

Age: \_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_

Age: \_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_

Shirt size \_\_\_\_\_

Shirt size \_\_\_\_\_

**Circle Group:**

Green Silver Gold Blue Black Xtreme

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Green Silver Gold Blue Black Xtreme

Address, City & Zip \_\_\_\_\_

Preferred phone number for practice change information \_\_\_\_\_

What High School do you attend? \_\_\_\_\_

What year will you graduate? \_\_\_\_\_

**Parent Information**

Father's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**REGISTRATION FEES WORKSHEET**

Registration Fees	\$ _____
Outstanding monies owed from previous season	\$ _____
*****ISI fee if needed***** (\$75.00)	\$ _____
<b>TOTAL REGISTRATION FEES DUE</b>	<b>\$ _____</b>

**Questions**

Head coach: **Mary Ruffin** 847-275-5571 – [maryruffin6@gmail.com](mailto:maryruffin6@gmail.com)

Membership Chairman: **Andy Topps** [registrar@alligatoraquatics.org](mailto:registrar@alligatoraquatics.org)

Team President: **John Andrew** -[president@alligatoraquatics.org](mailto:president@alligatoraquatics.org)

Team Website: [www.alligatoraquatics.org](http://www.alligatoraquatics.org)

**Consent Form**

**Family Name** \_\_\_\_\_

I agree to have my name, phone number(s), email address, mailing address, child(ren)'s name, age, and swim level printed in the Alligator Aquatics Directory.

Signature \_\_\_\_\_ Date \_\_\_\_\_

I do NOT agree to have my name, phone number, and address printed in the Alligator Aquatics Directory.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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I consent to have my child(ren)'s picture posted on the Alligator Aquatics website. (e.g., team picture, group photo(s), and individual pictures, pictures for newspaper articles, etc.) Please note: no athlete's name will be included on our website without additional consent.

Signature \_\_\_\_\_ Date \_\_\_\_\_

I do NOT consent to have my child(ren)'s picture posted on the Alligator Aquatics website.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Liability/Medical Release

\*Each swimmer will need a separate form\*

### Liability/Medical Release Form ORIGINAL

Print Your Last Name Here

If I am injured while participating in programs with the Alligator Aquatics, my family and I agree to waive any legal claim against USA Swimming, and those associated with USA Swimming, Illinois Swimming Inc. (ISI), Arlington Heights Park District, School District 214, Saint Viator HS, Harper College, Plum Grove Park District, Alligator Aquatics, and each of their respective officers, directors, Board Members, employees, agents and independent contractors. I give consent for the Alligator Aquatics to provide medical/athletic-training attention, transportation and emergency medical services as warranted. If I am injured while traveling to or from the Alligator Aquatics by public, private or any other means of conveyance, I agree to waive any legal claim USA Swimming, Illinois Swimming Inc. (ISI), Arlington Heights Park District, School District 214, Saint Viator HS, Harper College, Plum Grove Park District, Alligator Aquatics, and each of their respective officers, directors, Board Members, employees, agents and independent contractors. By signing this release, I swear that I am in good physical condition and am not aware of any disease or injury that would result in my being injured during any program participation. If I am under 18 years of age my parent or guardian shall sign this release with me.

Print Name of swimmer: \_\_\_\_\_ Swimmers Gender (M/F) \_\_\_\_\_

Signature of Swimmer: \_\_\_\_\_

Signature of Parent/Guardian (If athlete is under the age of 18) \_\_\_\_\_ Date \_\_\_\_\_

**To whom it may concern:**

I/We do herewith authorize the treatment by a qualified and licensed medical doctor of the following in the event of a medical emergency which, in the opinion of the attending physician, may endanger his/her life, cause disfigurement, physical impairment, or undue discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach a guardian (if athlete is under the age of 18). I/We do also attest that the questions answered below are accurate.

Name of athlete: \_\_\_\_\_ Signature of athlete \_\_\_\_\_

Signature of Parent/Guardian (If athlete is under the age of 18) \_\_\_\_\_ Date: \_\_\_\_\_

**Please check the appropriate answer. (All information will be kept confidential)**

Yes    No

    Has the athlete ever been hospitalized, or had surgery, a major injury or serious medical illness? (If YES, please specify):  
\_\_\_\_\_

    Is the athlete currently under the care of a physician for a medical problem or currently taking medication? (If YES, please specify):  
\_\_\_\_\_

    Has any physician ever recommended or do you feel that there should be limits placed on participation in competitive sports? (If YES, please specify):  
\_\_\_\_\_

    Does the athlete have any known allergies to medications? (If YES, please specify):  
\_\_\_\_\_

    Has the athlete ever blacked out or lost consciousness during physical activity? (If YES, please specify):  
\_\_\_\_\_

    Does the athlete wear contact lenses?

    This athlete is in good physical condition and has no condition or impairment which would impair participation or endangered their health in a physical training program.

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_