

NAC SWIM TEAM SPRING CLINIC 2022 REGISTRATION FORM

Please fill out all fields and use multiple forms for more than 2 swimmers. Forms with incomplete or illegible information may not be accepted.

Family Information				
Parent/Guardian Name(s):				
Address:				
City:	State:	Zip:		
Primary phone:	type: cell/landline	Secondary phone:	type: cell/landline	
Primary email:		Secondary email:		
Swimmer #1: (LAST)		(LEGAL FIRST)	(MIDDLE)	
Nickname/Preferred Name:		Gender: M/F	Date of Birth:	
NAC Member: YES/ NO		Returning Swimmer: YES/ NO	2021-2022 Group:	
Health/physical/emotional concerns:				
Swimmer #2: (LAST)		(LEGAL FIRST)	(MIDDLE)	
Nickname/Preferred Name:		Gender: M/F	Date of Birth:	
NAC Member: YES/ NO		Returning Swimmer: YES/ NO	2021-2022 Group:	
Health/physical/emotional concerns:				
Group	Fee with Registration before 3/20*	Fee with Registration after 3/20*	Number	Total
Senior Track 1	Member \$319/Non-Member \$369	Member \$339/Non-Member \$389		
Senior Track 2	Member \$269/Non-Member \$289	Member \$289/Non-Member \$309		
Junior Track 1	Member \$289/Non-Member \$319	Member \$309/Non-Member \$339		
Junior Track 2	Member \$239/Non-Member \$259	Member \$259/Non-Member \$279		
AG2/AG3 Track 1	Member \$199/Non-Member \$239	Member \$219/Non-Member \$259		
AG2/AG3 Track 2	Member \$149/Non-Member \$169	Member \$169/Non-Member \$189		
AG1/Dev2 Track 1	Member \$159/Non-Member \$179	Member \$179/Non-Member \$199		
AG1/Dev2 Track 2	Member \$109/Non-Member \$129	Member \$129/Non-Member \$149		
Developmental 1	Member \$109/Non-Member \$129	Member \$129/Non-Member \$149		
Dryland Add-On	\$149 per pack of 10 Parisi classes (expires July 15)			
<small>*Nonrefundable. Refunds will be given only for medical reasons at the Aquatics Department's discretion. Accounts will be billed between 4/1 and 4/15 for clinic. Families who register and withdraw prior to 4/1 will be charged 25%; families who register and withdraw prior to 4/15 will be charged 50%.</small>			Total Due	

For any questions regarding registration, please email swimteam@newtownathletic.com. Your registration will not be complete until we have the signed acknowledgements and payment info on file. Please see the following pages for clinic policies and payment information.

NAC Swimming- Liability Release

Participant expressly agrees on his/her behalf that all use of the club shall be undertaken at his/her sole risk, and that the Club's owners, managers and employees shall not be liable for any damages, injuries, or COVID-19 exposure to any member or guest, or be subject to any claim or demand whatsoever. Each participant assumes responsibility for him or herself and on behalf of his/her executors, administrators and assigns, does fully and forever waive, release and discharge the Club's owners, managers, employees and agents from any and all claims, demands, damages, rights of action or cause of action, present or future whether the same be known or unknowns, anticipated, resulting from, or arising out of, the Member or his/her guest, or his/her minor children's use or intended use of the Club's facilities and equipment.

Where the Participant is a minor (under 18), a parent or legal guardian must sign below indicating agreement with the terms this application on behalf of the minor child.

Signature _____

Date _____

Behavioral, Team Communication, and COVID-19 Policy

Swimmers and parents agree to follow the NAC Swim Team's anti-bullying and safe sport policies as outlined in the Winter 2021-2022 handbook, available at www.nacswimteam.com. Participant has reviewed and agreed to applicable COVID-19 policies and precautions with the understanding that the NAC does not hold any liability for swimmers contracting COVID-19. Team communication will take place primarily through email to minimize in-person contact; parents/guardians agree to check the email listed on the registration form for updates from NAC Swim Team staff. Failure to comply with team policies may result in the dismissal of a swimmer from Spring Clinic without refund.

Parent/Guardian Signature _____

Swimmer Signature _____

Date _____

Good Faith Registration Commitment

I understand that clinic fees will only be refunded for medical reasons at the discretion of the NAC Aquatics Department, and that by registering for the spring clinic, I am liable for all clinic fees. Because space is limited, families who turn in a registration form to claim a spot and later withdraw will be charged 25% if withdrawing before 4/1 and 50% if withdrawing before 4/10. Once spring clinic begins, refunds will be given only for medical reasons. We do not prorate for missed clinic sessions or missed weeks. For financial hardship situations necessitating discounted clinic fees, please reach out to the NAC Swim Team staff directly.

Parent/Guardian Signature _____

Swimmer Signature _____

Date _____

