



# YOTA MASTERS

Date Received	
Staff name	
Applicants PID	

## 2019-2020 MASTERS SWIM TEAM REGISTRATION FORM

Name \_\_\_\_\_ Gender \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

### Please select YOTA Masters Site

YOTA Master Swim Team Site  Oberlin or  Taylor (members only)      YMCA member  Yes No

### PROGRAM FEES PAYMENT VIA CREDIT CARD: Please select payment option

Please use credit card on file to process \$50 payment and future monthly drafts for Masters program

Please contact for first month payment and future monthly draft information

<p><b>YOTA Masters at Oberlin</b></p> <p><b>Location:</b> 1012 Oberlin Road Raleigh NC 27605 (located behind the Interact Building)</p> <p><b>Practice Day and Time:</b> Monday – Friday: 6:30 AM – 7:30 AM</p>	<p><b>YOTA Masters at Taylor</b></p> <p><b>Location:</b> 101 YMCA Drive Cary, NC 27513 (located behind the main YMCA building)</p> <p><b>Practice Day and Time:</b> Monday – Friday: 6:30 AM – 7:30 AM</p>
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**YOTA Masters Swim Team** – Join the YOTA Masters Swim Team and receive expertise coaching and technical training from some of the top swim coaches in the Triangle. All of our coaches are USA Swimming certified and American Swimming Coaches Association educated. Whether you want to compete in various meets around the country, or just get in (and stay in) shape, the YOTA Masters Swim Team is the perfect place to have fun and reach your swimming goals. Please contact Senior Director Jerry Foley if you have any questions at [Rachel.Muller@YMCATriangle.org](mailto:Rachel.Muller@YMCATriangle.org) or check out the YOTA Masters website under programs at: [www.yotaswimteam.org](http://www.yotaswimteam.org).

**Meets:**  
Masters meet entry fees are separate from the monthly draft. Joining United States Masters is not required but highly recommended if you wish to compete in US Masters swimming meets throughout the year or travel for work and would like to swim while you are on the road!

**Fees:**  
\$40 Monthly Training Fee (monthly credit card draft – 12 months per year)  
Month-to-month. You must email Rachel Muller ([Rachel.Muller@YMCATriangle.org](mailto:Rachel.Muller@YMCATriangle.org)) by the 15<sup>th</sup> of the month to cancel next month’s credit card draft.



## WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

In consideration for participating in the YMCA of the Triangle Area - Masters Swim Team, I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE YMCA of the Triangle Area and any of their officers, servants, agents, or employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise, while participating in such athletic and related event activities, or while in, on or upon the premises where the activities are being conducted.

To the best of my knowledge, I am in good physical condition and am not aware of any physical infirmity which would place me at risk to participate in YMCA of the Triangle Area activities. I am fully aware of risks and hazards connected with the activity, including the risk of injury to my neck, back, spine, knees or other parts of my body, and I hereby elect to participate as a voluntary participant in said activity. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH, that may be sustained by me, or any loss or damage to property owned by me, as a result of being engaged in such an activity, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES or otherwise. I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage or costs, including court costs and attorney's fees, that they may incur due to my participation in said activity, WHETHER CAUSED BY NEGLIGENCE OF RELEASEES or otherwise.

It is my express intent that this Waiver of Liability and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above-named RELEASEES, I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the State of North Carolina. In signing this release, I acknowledge and represent that I have read and understand it and sign it voluntarily; I am at least eighteen (18) years of age and fully competent; and I execute this Release for full, adequate and complete consideration fully intending to be bound by the same. I HAVE READ THIS WAIVER OF LIABILITY AND FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Participant's Printed Name

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Participant's Signature

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Date

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