



Connetquot Swim Club

PO Box 280 Bohemia, New York 11716

www.cscswimming.org

The Connetquot Swim Club would like to welcome all new and returning families to the 2009/2010 swim season. As we are readily approaching the upcoming swim season, it is necessary to begin this seasons' registration process.

Please print a copy of the registration package, complete all forms and send your completed package, including a check, payable to Connetquot Swim Club, for registration in the amount of \$175 per swimmer, (which includes the initial escrow funding of \$25), to the P.O. Box listed below by **August 31, 2009**.

CSC Registration

P.O. Box 280

Bohemia, New York 11716

We are looking forward to another exciting and successful swim season. In order to facilitate continued growth and provide a positive swim environment there has been a slight increase in this year's tuition. Information concerning tuition is provided under the tuition breakdown section of the registration package.

Please Note: -All tuition payments should be sent to **P.O. Box 280**. -For application of any discounts, all payments must be made in accordance with the proper dates.

-We will be hosting two swim meets this season. All families are responsible to work their required sessions.

For any questions or concerns, please feel free to contact any board member via e-mail.

All billing questions should be sent to treasurer@cscswimming.org

The Registration Package includes the following forms: (All forms must be completed)

- | | |
|--|--|
| <input type="checkbox"/> Registration Form | <input type="checkbox"/> CSC Medical History Questionnaire |
| <input type="checkbox"/> Business Manager Information Form | <input type="checkbox"/> USA Swimming Liability/Medical Release Form |
| <input type="checkbox"/> CSC Safe Starts Form | <input type="checkbox"/> CSC Team Suit Information Form |
| <input type="checkbox"/> CSC Medical Release Form | <input type="checkbox"/> CSC Team Shirt Information Form |

Connetquot Swim Club is a Not-For-Profit Organization.
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Registration Form 2009/2010

Please enter all the information requested. For "Swimmer's Name", please enter the child's first name, **middle initial** and last name. ***This is important for registration and insurance reasons.*** Please print clearly. Thank You.

Swimmer's Name: Last _____ First _____ MI _____

Date of Birth: _____ / _____ / _____ Swimmer's Age: _____

Male / Female

Parent(s) Names: (Father) **Last** _____ **First** _____

(Mother) **Last** _____ **First** _____

Address: _____

(City _____, New York (zip code) _____)

Home Phone: (_____) _____ - _____

Business Phone: (_____) _____ - _____

Mother Cell Phone: (_____) _____ - _____

Father Cell Phone: (_____) _____ - _____

Mother email: _____ @ _____

Father email: _____ @ _____

Other email: _____ @ _____

Swimmer's email: _____ @ _____

Previously registered at CSC? NO YES (Specify group/Program) _____

Any siblings registered? (If YES, Please give names) _____

Your child wishes to be a member of the Connetquot Swim Club competitive swim program, a competitive swim team that trains vigorously both in the water and through dry land exercises. There is no medical reason or any other reason to curtail this training. I, therefore give my child permission to be an active member of the Connetquot Swim Club pre-competitive swim program. At the time of registration, the registration fee is due.

- I ALSO REALIZE THAT IF MY CHILD DISCONTINUES SWIMMING FOR CONNETQUOT SWIM CLUB FOR ANY REASON I AM STILL RESPONSIBLE FOR ANY FEES OWED.

Date _____ Parent Signature _____

Check Number _____ Cash _____ Amount _____

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Business Manager Information

Please enter all the information requested. For "Swimmer's Name", please enter the child's first name, **middle initial** and last name. ***This is important for registration and insurance reasons.***

Please print clearly. Thank You.

Swimmer's Name: Last _____ First _____ MI _____

Date of Birth: _____/_____/_____ Swimmer's Age: _____

Male / Female

Parent(s) Names: (Father) **Last** _____ **First** _____

(Mother) **Last** _____ **First** _____

Address: _____

(City _____, New York (zip code) _____

Home Phone: (_____) _____ - _____

Business Phone: (_____) _____ - _____

Mother Cell Phone: (_____) _____ - _____

Father Cell Phone: (_____) _____ - _____

Group _____

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Connetquot Swim Club Safe Starts

The purpose of this notice is to make sure that the parents and swimmers of this team are fully aware of the potential danger involved in diving (racing starts) and pool, high school and insurance regulations.

Connetquot swimmers are not permitted to use the diving boards. This is a swim team, not a diving team. Connetquot swimmers are not allowed on the diving boards at any time, for any reason. If a swimmer is found on a diving board at practice or at a swim meet, that swimmer will be dismissed from the team.

In competitive swimming, swimmers must use dives to start their races (to enter the water). We call these dives "racing starts". It is very important for swimmers to know and understand the potential danger involved in racing starts. Most starting blocks are at the shallow end of the swimming pools. If a swimmer is not careful when using starting blocks, he or she could dive too deep. If the swimmer dives too deep, he or she could be very seriously injured. If a swimmer hits the bottom of a pool with his or her head, the potential injuries are very serious. These injuries include head injuries, concussions, neck injuries and spinal injuries. Head, neck and spinal injuries can result in permanent paralysis or even loss of life. Many become paralyzed for the rest of their lives.

Swimming is not a contact sport and injuries to swimmers are infrequent and generally minor. We feel it is important for swimmers and parents to be fully aware of this part of the sport which carries a very "real danger".

U.S. swimming prohibits diving off starting blocks during warm up, unless the Meet Director designates a one way sprint lane.

At Connetquot we follow several other strict rules to prevent injury or harm to our swimmers:

1. There is no running allowed on the pool deck.
2. No parents are allowed on the pool deck. Parents are not USS registered and therefore are not insured by United States Swimming. Please do not cross the barriers to the pool deck area.
3. There is no "horseplay" allowed anywhere in the pool area. This includes the locker rooms and the hallway. You are here to practice, not to play.
4. Children should be dropped off 10-15 minutes before their practice. This will give them sufficient time to suit up and be on the deck and ready to go at the appropriate start time. Please do not drop off your children early. There are many activities going on at the school and many people wandering around. Young children should not be sitting around the pool area without parental/guardian supervision.
5. Young siblings should be supervised and not allowed to run on the bleachers or the cement area surrounding the bleachers. They should not be swinging on the ropes/bars at the edge of the pool deck or playing ball/running in the hallway, this includes using skating type shoes. **These are insurance hazards.**
6. Fooling around in the locker area will not be tolerated. Accidents can happen on the wet shower and locker room floors. Younger children should be supervised in the locker room area. Coaching responsibility ends when the children leave the pool deck.
7. Swimmers should be picked up promptly. Please do not assume that your child will take 15 minutes in the locker room - be here at the end of the practice session.

We have read and understand these rules and plan to abide by them:

Swimmer's Name (please print) _____

Swimmer's Signature _____

Parent Signature _____

Date _____

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** Medical Release **

I hereby give my permission for any and all medical attention necessary to be administered to my child,

_____ (enter child's name) in the event of an accident, injury, sickness etc., under the direction of the person(s) listed below, until such time as I may be contacted. This release is effective for a period of one year from the date given below. I also hereby assume the responsibility for the payment of any such treatment.

My Address is

Home Phone: (_____) _____ - _____

Business Phone: (_____) _____ - _____

Mother Cell Phone: (_____) _____ - _____

Father Cell Phone: (_____) _____ - _____

My Insurance Company is _____

Policy Number _____

Our Physician is _____

Physician's Address _____

Physician's Phone Number (_____) _____ - _____

Known Allergies or other conditions necessary to be brought to emergency personnel:

In case I cannot be reached, the CSC Swimming Instructor/Agent is designated to authorize medical treatment. (Check one) Yes _____ No _____

Parent (s) Name (print): _____

Parent's Signature _____ Date ____/____/____



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Medical History Questionnaire

Athlete's Full Name (Last) _____ (First) _____ (M) _____

Date of Birth _____ Sex: M _____ F _____

Address: _____

Daytime Phone _____ Evening Phone _____

Parent (s) Name: _____

Address (if different than swimmer): _____

Family Physician's Name _____

Phone Number _____

Emergency Contact Name _____

Phone Number _____

Please Check the Appropriate Answer. All Information Will Remain Confidential.

1. Has this athlete ever had hospitalization, surgery, injury or serious medical illness? Yes _____
No _____.
2. Is this athlete under the care of a physician or taking any medication? Yes _____ No _____.
3. Has any physician ever recommended or do you feel that there should be limits placed on participation in competitive sports? Yes _____ No _____.
4. Does this athlete have any known allergies to medication? Yes _____ No _____.
5. Does this athlete wear glasses or contact lenses? Yes _____ No _____.
6. Has this athlete ever blacked out or lost consciousness during physical activity? Yes _____
No _____.

If the answer to any of the above questions was "Yes", please specify answers (i.e.: allergic to penicillin). _____

I/We consent to the participation of the above named athlete in the Connetquot Swim Team Program.

Parent/Guardian Name (print)

Parent/Guardian signature

Date



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USA Swimming Liability/Medical Release Form

Required liability /medical release form to be furnished by USA Swimming members participating in a covered competition.

Instructions: All forms should be given to the athlete with sufficient time for him/her to read and digest its contents before signing, especially if the parent/guardian signature is needed as well.

If I am injured while participating in programs at Connetquot Swim Club.

1. My family and I agree to waive any legal claims against USA Swimming (USA Swimming), and those associated with USA Swimming, Metro Swim (LSC) and Connetquot Swim Club.
2. I give consent for Connetquot Swim Club to provide medical/athletic-training attentions, transportation and emergency medical services as warranted. If the program in which I am participating includes Physiological and/or biomechanical evaluations, I further consent to these evaluations which pose no risks or hazards when customary safeguards are observed.

If injured while traveling to or from Connetquot Swim Club by public, private or any other means of conveyance, I agree to waive any legal claims against USA Swimming, Metro Swim (LSC) and Connetquot Swim Club. By signing this release, I swear that I am in good physical condition and I am not aware of any disease or injury that would result in my being injured during any program participation.

If I am less than 18 years of age or a minor under the laws of the state where I live, my parent or guardian shall sign this release with me.

I agree that I will not bring or possess alcoholic beverages, illegal drugs or International Olympic Committee-banned substances on these premises. I further understand and agree to abide by general rules of conduct prescribed for participants in this function ant that violations may result in a denial of meet privileges.

Printed Name (Swimmer)

Signature (Swimmer)

Date

Parent/Guardian Signature

Date

Street Address

City

State

Zip

Phone

Medical History

As you fill this out, please keep in mind that your child will be on a competitive swim team.

Doctor's Name _____ Phone Number _____

Dentist's Name _____ Phone Number _____

Any information that the coaching staff should know (broken bones, recent illness or surgery, concussion, medical conditions, allergies, etceteras) _____

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Team Suit Information 2009/2010 Season

The team suit for the upcoming season will be the same as last year.

We are trying to pre-order as many suits as possible. If you know your swimmer's suit size, please complete **Section I** below. If you are unsure of your swimmer's suit size please complete **Section II** below. This information will be used as an ordering guide for Stacey Dundas, swimsuit coordinator.

Please complete and include this form with your registration package.

Please Order the following size:

Section I

Name _____ Age _____ M/F Size _____

Name _____ Age _____ M/F Size _____

Name _____ Age _____ M/F Size _____

Section II

Name _____ Age _____ M/F Size last year _____

Possible size this year _____

Name _____ Age _____ M/F Size last year _____

Possible size this year _____

Name _____ Age _____ M/F Size last year _____

Possible size this year _____

*For those of you who are not sure of your swimmer's size, there will be a "Suit Sizing Day" held in September. You will be notified via e-mail of the date.



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Team Shirt Information 2009/2010 Season

We are trying to pre-order as many Shirts as possible. Please fill out the form below and enclose with your registration package. This form will be given directly to the vendor and will be as you specify. **Please note:** If this form is not submitted, you will not receive a team shirt.

Thank you for your cooperation.

Please Order the following size:

Name on back of T-shirt _____ M/F Size _____
It can be a nickname, First name or Last Name; (i.e. small, med, large)
However, it can only be one name

Additional Swimmer Info (if you have more than one swimmer on the team)

Name on back of T-shirt _____ M/F Size _____

Name on back of T-shirt _____ M/F Size _____

Name on back of T-shirt _____ M/F Size _____

If any parents would like to purchase a T-shirt, for themselves or any non swimming siblings, please complete the information below. The price for each T-shirt is \$12.00, with or without a name. Please enclose a separate check for this order. (Please make check payable to Connetquot Swim Club)

Name on back of T-shirt _____ M/F Size _____ # of T-shirts _____

Name on back of T-shirt _____ M/F Size _____ # of T-shirts _____

Name on back of T-shirt _____ M/F Size _____ # of T-shirts _____



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CSC Tuition Discounts

Please be advised that there are several discounts that are available to all swim families. We welcome all families to take advantage and utilize these discounts. Below is a synopsis of these discounts and how they are calculated and the timeframes that govern them.

In order to be fair to everyone, we must apply these discounts in a strict manner as they are stated.

If you need any clarification on the application of the discounts please feel free to contact us at treasurer@CSCSWIMMING.ORG or you can contact our Treasurer directly and as always you can speak with any of the board members.

Multiple Swimmer Discount - For those families with multiple swimmers, a 20% discount will be applied in the following manner: The swimmer in the highest ability group will pay full price, and the discount will be applied to each additional swimmer's tuition after the initial swimmer's tuition is paid in full. Further, in order to qualify for this discount any and all swimmers must be swimming for the full swim year calendar (September to July) and all accounts **MUST** be paid in full and/or up to date by **February 28** of the current swim year.

Early Payment Discount - A 10% discount will be applied to the tuition portion of your obligation only, after any and all other discounts are applied to those who pay their account balances in full by **November 1**, of the current swim year. No exceptions or extension provisions will be made. If you wish to receive the 10% discount, the account **MUST** be paid in full no later than the indicated date. This discount will be in addition to any multiple swimmer discounts you receive.

Varsity and Junior Varsity Discount - Given to those swimmers who participate in their school district's varsity or junior varsity swimming program. This discount will only be given provided that the swimmer has had his/ her registration paid and is an active member of CSC for the full current swim year, whose account is paid to date. You **will not** receive this discount if your child registers as a CSC swimmer after his/her school swim season. **(You may not inactivate the swimmer for any portion of the season so as to avoid tuition payments)**. Junior Varsity discount is \$50.00. Varsity discount is \$75.00. These discounts will be applied as a credit to your escrow accounts.



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CSC Tuition Breakdown

The following breakdown of the registration, tuition and escrow fees will be helpful in providing information regarding your financial commitment upon joining the Connetquot Swim Club.

Registration - The registration fee for each swimmer is \$150.00 and is a one time non-refundable payment, which will provide for registration with USA swimming, insurance, team cap, team suit and a team t-shirt. Your athlete will not be considered an active member of the Connetquot Swim Club unless the registration fee has been paid. **Mid-Season registration discounts are not available.** All registration fees are to be paid by **August 31**, of the current swim year. **No swimmer will be permitted to swim until the registration fee is paid.**

Escrow – **The initial escrow of \$25 must be paid along with your registration fee.** There are fees due for the meets that your child is entered in. These fees vary depending on the meet. The average fee per event is approximately \$3.00. For example, if your child swims 4 events, a charge for \$12.00 will appear on your bill as a charge against your escrow account. Escrow is the money that is set aside specifically to pay for the entry fees into meets. It is separate from the tuition and the amount due for meet entry fees will vary depending on the amount of meets and events your swimmer will be entered in. Escrow activity in your account will be reflected in your monthly statements. **You are required to keep your escrow balances current.**

Tuition - Tuition varies based on the group each swimmer is placed in. Upon registration with CSC, the athlete is making a commitment to the team for the *full season* regarding practice and meets. Parents are making a financial commitment as well. The tuition payments are broken down into five payments beginning in October. Please note that if you fail to pay the tuition in a timely manner, (by the end of each month), your child will not be permitted to practice with the team until such time as the tuition account is up to date. All accounts are to be paid in full and/or up to date by **February 28**, of the current swim calendar year. The tuition structure will be as follows:

	Aug. (Registration + Initial escrow)	Oct.	Nov.	Dec.	Jan.	Feb.	Total (Monthly Tuition Installment)
Sharks Black	\$150 + \$25 = \$175	\$130	\$130	\$130	\$130	\$130 =	\$650
Sharks Red	\$150 + \$25 = \$175	\$130	\$130	\$130	\$130	\$130 =	\$650
Intermediate	\$150 + \$25 = \$175	\$160	\$160	\$160	\$160	\$160 =	\$800
Junior Elite	\$150 + \$25 = \$175	\$180	\$180	\$180	\$180	\$180 =	\$900
Junior Elite Gold	\$150 + \$25 = \$175	\$190	\$190	\$190	\$190	\$190 =	\$950
Senior Elite Black	\$150 + \$25 = \$175	\$200	\$200	\$200	\$200	\$200 =	\$1,000
Senior Elite Red	\$150 + \$25 = \$175	\$200	\$200	\$200	\$200	\$200 =	\$1,000

Should the swimmer choose to leave prior to the completion of the season, **parents, please note that you are obligated for the full season's tuition. No tuition rebates will be given if you leave during the year.**