



2011-2012
Northern Colorado Orcas
Synchronized Swimming
Beginner Lesson Registration Packet

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip _____

School _____ Grade _____ DOB _____ Age (as of 12/31/2011) _____

Home Phone _____ Swimmer Email (if applicable) _____

Cell Phone _____ Parent Email _____

Parent Names:

_____ Work Phone _____ Cell Phone _____

_____ Work Phone _____ Cell Phone _____

Emergency Contact: _____ Phone _____ Cell Phone _____

Include all emails on team communications? Yes ___ No ___ Specify: _____

Any other information Coaches need to know about your swimmer?

Please check the level which applies to the registering swimmer (see detail on next page):

<u>Check here</u>	<u>PRACTICE GROUP</u>	<u>FEE</u>	<u>Included in Payment</u>
	Beginner Lessons (Sunday Sept 11, 18, & 25 from 4-5 pm at TVHS)	\$ 15	
TOTAL DUE BEFORE LESSONS BEGIN			

Signature of parent/guardian _____ Date _____



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Fee Information

All Orca team members (not students enrolled in lessons) are required to pay a **one-time \$50 registration fee** submitted with their registration packet and the first months team fees. Monthly fees are based on pool and coach time per week. Fees cover USA Synchro Registration, Meet Registration fees, supplemental conditioning, gear, etc. See table below for details.

Level	Monthly fee ⁴	General practice schedule <i>*TENTATIVE*</i>	Duration of Season	One time registration and monthly fees includes ³
Beginner Lessons (For new synchro swimmers)	3 lessons for \$45	Sundays 4-5 TVHS	Sept 11, 18, 25 (may continue at novice level)	<ul style="list-style-type: none"> Synchro Instruction 1 nose clip NO REGISTRATION FEE REQUIRED.
Recreational Program (For new synchro swimmers and swimmers with some synchro experience)				
Novice	\$ 125	Sun 4-5:30 TVHS Tues 5:00-6:30 EPIC	August – January² (option to continue to May for competitive season)	<ul style="list-style-type: none"> USA Synchro Registration Fee All meet registration fees Orcas Swim cap 10 nose clips Team swim suit Orcas t-shirt Pools, coaches, and supplemental conditioning (eg. Pilates or yoga)
Intermediate Recreational	\$ 60	Sun 4:30-6:30 TVHS	Begins Sept 11 (on going based on swimmers' interest)	<ul style="list-style-type: none"> USA Synchro Registration Fee All meet registration fees Orcas t-shirt Pools and coaches
Competitive Program (Synchro skillset evaluated by coaches)				
Intermediate Competitive	\$ 175	Sun 4:30-6:30 TVHS Tues 5:30-7:30 EPIC Thurs 6:30-8 TVHS(occasional)	August – May	<ul style="list-style-type: none"> USA Synchro Registration Fee All meet registration fees Orcas Swim cap 10 nose clips Team swim suit Orcas t-shirt Pools, coaches, and supplemental conditioning (eg. Pilates)
Lower Age Group 11-12 & 13-15	\$ 225	Sun 4-6:30 TVHS Tues 5:00-7:30 EPIC Thurs 6:30-8 TVHS Sat 7:-10 TVHS ¹	August – July	
Upper Age Group 16-19	\$300	Sun 4-7 TVHS Tues 5-8 EPIC Thurs 6:30-8 TVHS Sat 7:-10 TVHS ¹	August – July	
POOL KEY ----- EPIC: Eudora Pool & Ice Center in Fort Collins ----- TVHS: Thompson Valley High School in Loveland				

¹ Saturday practices (7-10 am) are 2x/month for Age Group. Once at TVHS and one enrichment/supplemental conditioning (such as yoga, pilates, rock climbing, athlete education, etc.). All swimmers are invited, but it is required for Age Group.

² Recreational swimmers only participate in one or two water shows and one meet. Rec swimmers who wish to may shift to the competitive program from February –May.

³ Additional expenses may include custom swim suits, travel to meets, coaches travel, team warm up suits, and other mutually decided costs. Fund raising efforts are implemented to subsidize these costs

⁴ 10% discount for multiple swimmers per family.

Northern Colorado Orcas Synchronized Swimming
PMB 292, 749 S. Lemay Ave, Ste A - Fort Collins, CO 80524
Email: orcassynchro@gmail.com - Phone: 970-282-5150



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WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in U.S. Synchronized Swimming (*USA Synchro) events, activities, or programs, I acknowledge and agree that:

- I understand that I or (if the participant is a minor) my child or ward, will be engaging in travel and activities that involve the risk of serious injury, including permanent disability and death, severe social and economic losses and other loss including damage to property.
- I knowingly and freely assume all such risks.
- I, for myself, my minor child or ward, and on behalf of my and their heirs and assigns, release, waive, discharge and covenant not to sue U.S. Synchronized Swimming, Inc., its officers, agents, employees, and sponsors as well as its affiliate clubs, from any and all liability for any and all claims, demands, losses or damages on account of injury, including death and damage to property, whether caused by negligence or otherwise.
- If the participant is a minor, I consent to the collection of personal information regarding my child or ward through USA Synchro's online Membership Management System, as "personal information" is defined in USA Synchro's On Line Privacy Statement.
 - I **[do]** **[do not]** consent to my child or ward as applicable, being listed in the USA Synchro Directory.
 - I **[do]** **[do not]** consent to my child or ward, as applicable, receiving from USA Synchro electronic communications, such as an electronic newsletter, and information concerning programs and other opportunities offered by USA Synchro.

Opt-Out of Collection of Personal Information:

The parent or guardian has the option to agree to the collection and use of the child's information without consenting to the disclosure of the information to third parties. USA Synchro shall not require a child to disclose more information that is reasonably necessary to participate in an activity as a condition of participation. The parent or guardian can review the child's personal information, ask to have it deleted and refuse to allow any further collection or use of the child's information. USA Synchro will change the contents of any personal information of a child maintained by USA Synchro at the request of the child, parent or guardian. In order to maintain membership for a person, regardless of age, USA Synchro must maintain certain personal information regarding the member. The parent of guardian understands that if s/he requests that such information be deleted from its Online Membership Management System, USA Synchro will advise the participant that s/he cannot continue to be a member.

Participant's Signature _____ Date Signed _____

Participant's Name (print) _____

If athlete is less than 18 years of age, the parent of legal guardian must sign also.

This is to certify that, as parent/guardian of this participant, I do consent to his/her waiver and release as set forth above and also agree to assume all such risks and to waive the right to sue the releases.

Parent/Guardian Signature _____ Date Signed _____

Parent/Guardian Name (print) _____ Relationship _____

WAIVER AND RELEASE FORM MUST BE COMPLETED BY ALL MEMBERS EACH YEAR

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PHOTOGRAPHIC AND INTERVIEW RELEASE
2011/2012 SEASON

I hereby grant consent to use and release to the Northern Colorado Orcas dba Choice Cities LLC the use of my name and likeness, whether in still, motion pictures, audio and video tape; my photograph and/or reproductions of me including my voice (which includes commentary, remarks, and/or recordings); my features, with or without my name, for any promotional purposes involving the Orcas or synchronized swimmer, for news and/or feature stories in the Media (which includes internet, print, radio, television, Facebook, and other social media) or other purposes whatsoever, except for the endorsement of commercial products.

These items may be used without limitation or reservation of any fee.

Minors cannot consent to media interviews or waive their privacy right. These decisions must be made by parents/guardians; therefore, this release form must be signed by parents/guardians when the individual is a minor.

Swimmer Name Age

Swimmer Name Age

Signature of Parent/Guardian (if minor)

Print Name