

2009-2010 HEAT Registration Form

Swimmer's Name: _____

Parent/Guardian: _____

Address: _____

Phone Numbers: _____

Email: _____

In Case of Emergency, and the parent/guardian cannot be reached, please contact:

Name: _____

Phone: _____

Swimmer's Birthdate: _____

Select months to swim (minimum of three):

September October November December January February March

Group 1: \$80.00 per month \$64.00 per month (1 practice per week)

Group 2: \$100.00 per month \$80.00 per month (1 practice per week)

Group 3: \$110.00 per month \$88.00 per month (1 practice per week)

Group 4: \$120.00 per month \$96.00 per month (1 practice per week)

Group 5: \$140.00 per month \$112.00 per month (1 practice per week)

Booster Club Fee: \$100.00 – one payment
(per family) \$33.40 – paid over three months (first three months checked above)
or
 \$14.30 – paid over seven months (September – March)
 \$50.00 (one practice per week)

USA Swimming Fee: \$60.00
(per child)

Membership in the Champaign County YMCA is required for team members. You can register for membership at the front desk.

2009-2010 HEAT Waiver

Swimmer(s) Name(s) _____

In consideration of you accepting my registration with the Champaign County YMCA HEAT, I hereby for myself, my heirs, executors and administrator, waive, release, and forever discharge any and all rights and claims against sponsoring organizations, coaches, other swimmers, adults aiding in the program, etc., and/or their designates for any and all damages which may be sustained and suffered by my child(ren) in connection with their participation or other association with HEAT, including but not limited to my traveling to or participating in and returning from any HEAT event.

My child(ren) are fully covered by my insurance. I hereby authorize any registered physician or licensed hospital to perform any treatment they judge necessary in an emergency.

As a parent/guardian, I hereby consent to the conditions stated above:

Signature of Parent/Guardian _____ Date _____

2009-2010 HEAT Directory

By signing below I give permission to include our contact information in a team directory that will be used only for internal team purposes.

Signature of Parent/Guardian _____ Date _____

YMCA Membership Information:

One-time Joining Fee - \$90.00

Youth (preschool-high school) - \$15.00/month

Adult (one adult plus dependent children up to age 18 in same household) - \$38.00/month

Two Adult (two adults plus dependent children up to age 18 in same household) - \$61.00/month

HEAT Swim Team Agreement

1. Team fees are charged on a monthly basis on the 1st of the month. Parents have the option to pay by automatic draft from credit card, checking or savings accounts. You will be billed for the season (April-July) as per your indications on the registration form.
2. Fees are based on enrollment, not attendance; **no adjustment will be made for non-attendance.**
3. If an athlete attends two or more practices during a particular month, they will be charged for that month whether the registration form shows registration for that month or not.
4. Payment must be made prior to attendance in the program.
5. Your monthly bank/credit card statement is your receipt of payment.
6. All returned checks or bank drafts will be charged a return fee of \$25.00 per transaction.
7. It is your responsibility to read and understand the policies set forth in the parents' handbook.
8. The YMCA reserves the right to make changes in its programs and program fees without advance notice. Also, the YMCA reserves the right to close programs that do not meet the minimum requirements for attendance.
9. As mandated by the State of Illinois, we will report any form of abuse or any suspicion of abuse.
10. Periodically, the YMCA takes pictures of the children participating in different YMCA activities. These pictures may be displayed in presentations, flyers, brochures or other YMCA publications. If you prefer your child's picture not be used, please indicate this in writing to the Champaign County YMCA HEAT Team Administrator.

Signature _____ Date _____

Bank Draft and Credit Card Authorization

I authorize my bank/credit card to honor pre-authorized drafts drawn by the YMCA on my account for the Champaign County YMCA HEAT Competitive Swim Team fees. When the bank/credit card honors the draft by charging my account, such drafts constitute my receipt for payment. Should any draft not be honored by said bank when received by them, it is understood that the payment is to be made in the amount of said payment plus a service charge. Said payment and service charge may be submitted as an additional draft at any time following the notice of the dishonoring of the original bank draft. Regardless of attendance, charges will be drawn for the months committed to at registration plus any months where an athlete attends two or more practices. Any changes in payment information affecting my Champaign County YMCA HEAT Competitive Swim Team draft are required to be submitted in writing with a 15-day notice. Failure to do so will result in the next month's draft being non-refundable. Drafts will occur on the 1st of every month. **Voided check or savings account information is required with all bank draft applications.**

Please continue to use the same account information as for the prior season.

Please use the new account information below.

Signature _____ Date _____

Bank Drafts: Bank Name _____

Routing Number _____ Account Number _____

Credit Cards: _____ Master Card _____ Visa _____

Account Number _____ Expiration Date _____