

Danville Sea Devils Registration-2010

Instructions

General Instructions

Thank you for your interest in the Danville Sea Devils! Kicking off our 27th year, the Danville Sea Devils is a non-profit recreational swim team. We provide an environment where kids learn to love the sport of swimming through great coaching and community.

Please print this packet, complete all forms in pen and bring them with you to our New Member Registration on February 18th at the Danville Station Clubhouse.

Complete all fields on the forms including the Responsible Parent and Registered Swimmer.

When you have completed the forms, make sure you SIGN each form. These signatures are important to ensure your child gets the help they need in the event of an emergency.

Should you have any questions, please contact Mary Lindner, Membership Director at thelindners@yahoo.com.

General Form

Parents/Guardians

Provide all of the information requested. Make sure you indicate which Homeowner's Association you belong to. If you are a member of the Danville Station HOA, you are eligible for a discount.

Make sure you provide information for BOTH parents or Responsible Adults

Provide as many contact points as you can. This helps us locate you when necessary.

Swimmers

Provide the name and any nicknames your child prefers along with their sex and birthdate.

Select the appropriate Age Group from the list. The Birthday Cut-off is June 15 of the current year. Your child will be in the age group for his age as of June 15 of this year.

Provide any information you have on your child's medical conditions or needs. This information is used by the coaches and staff and is provided to any emergency care provider if required.

SIGN THE FORM

Emergency Information Form

Insurance and Doctor

Provide the information requested. It is required in case of emergency to ensure your child gets the most appropriate care possible.

Read the Authorization and SIGN the Form

Alternate Emergency Contact

Provide contact information for an Alternate Emergency Contact that should be contacted when you or the Other Responsible Adult is not available. This person should be someone who is generally available and able to make decisions regarding your child's care. You should not provide information for a relative who is not available to make those decisions.

Agreement to Indemnify

Read the Agreement carefully and sign the form. This form is required by both the Team and the Danville Station Homeowners Association. No swimmer will be allowed in the pool unless this form is signed by the Responsible Adult.

Parent Job Information

Parent Job Expectations and Descriptions

Parent jobs are essential in running a swim team. There are many different types of jobs that need to be done to run both the team and the meets. It is not known yet how many jobs each family will have to as it is based on the number of jobs and the number of families. Some years each family has had to work 7 jobs and other years just 4 jobs. Please review the brief job descriptions below. You will have an opportunity to select your parent jobs online in May. The jobs will be assigned on a first come, first served basis.

Meet Schedule

Each scheduled meet is listed here. Please mark them on your calendar and be prepared to select which days you are able to work when the online job sign ups become available in May.

Fees and Refund Policy

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General

Parents/Guardians

	Responsible Parent	Spouse/Other
Relationship	_____	_____
Name (First Last)	_____	_____
Address	_____	_____
	_____	_____
City, ST Zip	_____	_____
Homeowner's Assn	_____	_____
Home Email	_____	_____
Work Email	_____	_____
Home Phone	_____	_____
Work Phone	_____	_____
Cell Phone	_____	_____

Swimmers

1. Name (First Last)	_____	Circle Sex: Male Female
Birthdate	_____	Age Group: _____
Medical Information or Special Needs:	_____	
2. Name (First Last)	_____	Circle Sex: Male Female
Birthdate	_____	Age Group: _____
Medical Information or Special Needs:	_____	
3. Name (First Last)	_____	Circle Sex: Male Female
Birthdate	_____	Age Group: _____
Medical Information or Special Needs:	_____	
4. Name (First Last)	_____	Circle Sex: Male Female
Birthdate	_____	Age Group: _____
Medical Information or Special Needs:	_____	
5. Name (First Last)	_____	Circle Sex: Male Female
Birthdate	_____	Age Group: _____
Medical Information or Special Needs:	_____	

I/We, the parents (or guardians) of the above named child(ren), give our approval for the participation in any and all activities of the Danville Sea-Devils Swim Team during the course of the season. We absolve and release the swim team, any person connected with the team, the Danville Station Homeowners Association, the Board of Directors and members of any and all responsibility for accident or injury incurred as a result of the swimmer's participation in any and all activities, including transportation to and from meets or other team activities.

Signature of Responsible Parent

Date

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Emergency Information

Responsible Parent _____

Registered Swimmers _____

Insurance and Doctors

Primary Care Physician _____

Phone _____

Primary Dentist _____

Phone _____

Insurance Carrier _____

Policy Number _____

In the event of injury or illness during a Danville Sea Devils swim meet or other team event or activity, I/we authorize officials of the Danville Sea-Devils to administer first aid and, if necessary, transport my child(ren) to a duly licenses physician or hospital to administer emergency treatment.

Signature of Responsible Parent

Date

Alternate Emergency Contact

Name (First Last) _____

Relationship _____

Address _____

City, ST Zip

Home Phone _____

Work Phone _____

Cell Phone _____

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Agreement to Indemnify

Responsible Parent _____

Registered Swimmers _____

The Danville Sea-Devils Swim Team desires to use the swimming facilities of the Danville Station Homeowners Association (DSHOA) for practices and instruction under the terms and conditions of the Agreement for Use of Pool Facilities currently in force. The undersigned is the parent of a team member or members as listed above.

By signing below, I acknowledge that I or my child(ren) may use the DSHOA swimming facilities for practice and instruction as part of the Danville Sea Devils Swim Team only if I agree with the terms and conditions listed on this page. I understand that any such use of the facilities will be solely at my (our) own risk and that the facilities are made available on an as-is basis.

By Signing below, I agree to NOT hold DSHOA, its directors, its employees, or its members liable for any injury I or my child(ren) may sustain from use of the swimming facilities in conjunction with a team practice or event, from crossing DSHOA property to reach a practice or event, or while waiting for anyone engaged in a practice or event. Included are injuries arising from equipment in use or stored on DSHOA property.

By signing below, I also agree to indemnify, hold harmless, and defend DSHOA, its directors, its employees, and its members from any action to recover damages arising from use of the facilities by me or my child(ren) for team practice or events or arising from travel to, waiting during, or travel from a team practice or event by me, my child(ren) or anyone else in my care.

Signature of Responsible Parent

Date

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Parent Job Expectations and Descriptions

Parent volunteers make our meets run smoothly! We couldn't do it without you. Below is a list of the types of volunteer jobs that will need to be filled and a brief description of each. You will select your on jobs and dates to perform those jobs online in May.

Desk Help	Assist in computer scoring and ribbon assignment at meets
Shepherd	Organize swimmers at the meet
Timer/Runner	Timing races and running times to desk staff
Set up/Clean up	Setting up/tearing down tents, chairs, lane lines, PA system and computer system
Stroke and Turn Judge	Attend Stroke and Turn training then judge meets. Experience in swimming is a plus.

Meet Schedule for 2010

Below is the Swim Meet Schedule. You may refer to this when determining your availability to work meets. Danville Sea Devils home meets are at San Ramon Valley High School (SRVHS).

DAY	DATE	TEAM	LOCATION
Saturday	June 5	Time Trials	SRVHS
Saturday	June 12	Club Sport	SRVHS
Wednesday	June 16	Roundhill	RHCC
Saturday	June 19	Diablo Country Club	TBD
Wednesday	June 23	Crow Canyon Country Club	Crow Canyon Country Club
Saturday	June 26	Team Event	TBD
Wednesday	June 30	TBD	SRVHS
Wednesday	July 7	Blackhawk	Blackhawk
Saturday	July 10	San Ramon Aquacats	Cal High
Wednesday	July 14	Del Amigo	Del Amigo
Saturday	July 17	Sycamore	SRVHS
Wednesday	July 21	TBD	SRVHS
Saturday	July 31st	League Championships	TBD
Sunday	August 1 st	League Championships	TBD

I understand and agree that our family will be responsible to work a specified number of jobs throughout the season and at Championships. I further understand and agree that I may have the opportunity to switch jobs with other parents or pay for a replacement, but am ultimately responsible for the job being filled. If a job goes unattended, I understand I will be charged \$75 per job.

Signature of Responsible Parent

Date

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Fees and Refund Policy

Registration fees are due on the date of registration. If you cannot pay at this time, your child will not be allowed to attend practice. If registration fees are not paid in full by the first practice, your child will forfeit their place on the team and their space will be given to another family.

2010 Swim Season Fees

Regular Swimmer - \$345.00
High School Swimmer (15-18 years old) - \$30.00
Lil Devils Swim Program - \$230.00

\$50.00 One-time per Family Discount for Danville Station Homeowners

Refund Policy

New Swimmers - The first two weeks of practice are used as a trial period for new swimmers. If your child is unable to swim during the first two weeks, you will be entitled to a refund of your registration fee. The amount of refund will be determined on a sliding scale according to the schedule below.

Leave anytime during the First Week	100% refund *
If your last day during the second week is:	You are entitled to a refund of: *
Monday	80%
Tuesday	60%
Wednesday	40%
Thursday	20%
Friday	0%

* Minus a \$50 administrative fee

Returning Swimmers - For returning swimmers, you will be eligible for a refund on the sliding scale indicated below for the first week of practice ONLY.

Refund Administration Fee – For all refunds, there is a \$50 administrative fee deducted from your registration fee associated with cancellations after initial registration.