



**POCONO FAMILY YMCA  
SPRING SWIM TEAM 2016 REGISTRATION**  
(April 3 - JUNE 17, 2017) (REGISTRATION OPENS 2/24/17)



Who: Any swimmer wishing to improve their Stroke Technique, train for YMCA, USA swimming meets, YMCA Nationals, stay in shape or get ready for summer swim team. (Swimmers must pass simple entrance test) (Meets are available on Weekends)

**Family Info: (PLEASE MAKE SURE TO FILL OUT BOTH SIDES OF REGISTRATION FORM)**

Family Last Name: **(Not Swimmer's Name)** \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Alt Phone: \_\_\_\_\_ Family Email: **(Required)** \_\_\_\_\_

Fathers Name: \_\_\_\_\_ Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ Cell#: \_\_\_\_\_

Mothers Name: \_\_\_\_\_ Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ Cell#: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell#: \_\_\_\_\_

**>PRACTICE SCHEDULE:**

Please indicate below checking the box to the left of your intended practice attendance to help us schedule coaches effectively. This does not obligate you to this schedule and can change at any time it just let us know of any changes.

<input type="checkbox"/> <b>POCONO MOUNTAIN WEST HS: (Limited to 60)</b> Mon, Wed, Friday – 6:00-8:30 pm <b>(Practice times will vary for each practice group)</b> * Saturday Practices are not on scheduled Meet Days.	<input type="checkbox"/> <b>LEHMAN INTERMEDIATE: (Limited to 60)</b> Monday, Wednesday – 6:00-8:30 pm Thursday – 6:30-8:30 pm <b>(Practice times will vary for each practice group)</b>
<input type="checkbox"/> <b>EAST STROUDSBURG SOUTH HS: (Limited to 40)</b> Mon, Wed – 6:00-8:30 pm Tuesday & Thursday – 6:30-8:30 pm <b>(Practice times will vary for each practice group)</b>	<input type="checkbox"/> <b>POCONO FAMILY YMCA: (When Scheduled)</b> Saturday – 6:00 am-8:00 am * Sunday – 9:00 am – 12:00 noon ** <b>(Practice times will vary for each practice group)</b> * Saturday Practices are not on scheduled Meet Days. **Sunday Practices only when Scheduled.
<input type="checkbox"/> <b>STROUDSBURG INTERMEDIATE (Limited to 30)</b> Tuesday & Thursdays – 6:30-8:45 pm (Senior Groups ONLY) <b>(Practice times will vary for each practice group)</b>	

**Note:** All swimmers will be placed in practice groups by age, ability and swimming performance. Qualifying times and age requirements for each practice group are posted on our team's website.

**MEET SCHEDULES, TEAM RULES & PRACTICE SCHEDULES ARE POSTED ON TEAM WEB SITE – WWW.PFYSWIM.ORG**

<b>11 &amp; Up: YMCA MEMBERS</b>	<b>\$165.00</b> ____	<b>11 &amp; Up: NON -YMCA MEMBERS:</b>	<b>\$195.00</b> ____
<b>9-10: YMCA MEMBERS</b>	<b>\$125.00</b> ____	<b>9-10: NON -YMCA MEMBERS:</b>	<b>\$155.00</b> ____
<b>8 &amp; Under: YMCA MEMBERS</b>	<b>\$90.00</b> ____	<b>8 &amp; Under: NON -YMCA MEMBERS:</b>	<b>\$120.00</b> ____
<b>Total fees: _____ Make Check Payable to Pocono Family YMCA</b>			
<b>YMCA MEMBERSHIP IS NOT REQUIRED TO JOIN SPRING SWIM TEAM: YMCA Membership fees are not included in Team Fees.</b>			

**>Office Use Only:** - Please indicate membership expiration on the back page for each swimmer.

Membership Verified: \_\_\_\_\_ (init) Amt Collected: \_\_\_\_\_ (Cash) (Check) (Credit Card)

Receipt #: \_\_\_\_\_ (Monthly Bank Draft) \_\_\_\_\_

## MAKE SURE EACH CHILD IS LISTED BELOW AND ALL INFORMATION IS COMPLETED.

	Swimmer Name /s First, Middle Initial, Last			YMCA Membership Expiration Date <i>(Office Use Only)</i>	Date of Birth	T-Shirt Size	Sex F or M	Medical Conditions or Special Notes
EX	Joseph	W	Swimmer <i>(Example)</i>	4/06 or N/A	10/15/89	XL	M	None
1								
2								
3								
4								
5								
6								

>**NEW SWIMMERS:** All new swimmers are required to **Try-Out** for the Winter Swim Team. To arrange a Try Out go to <http://pfyswim.org/tryout/>

>**TEAM INFORMATION AND UPDATES:** Will be posted on our "Team Web Site".

>**TEAM HANDBOOK & TEAM RULES:** Team Handbooks will be distributed through email & on team website. "Team Rules" can be viewed online at our team's web site.

>**TEAM PRACTICE EQUIPMENT:** Each swimmer will need to purchase practice equipment depending on assigned practice group. Practice equipment can be purchased through our online store <http://store.pfyswim.org> Equipment list is posted on our team's web site. Please speak with Coach Mike if this creates financial difficulty for you.

>**COMMUNICATION:** We use our team web site and email for a large part of our communication. **WWW.PFYSWIM.ORG** All team information as well as any practice or event changes will be posted on the web site and through team email.

>**CHECKS:** All checks payable to the **(POCONO FAMILY YMCA for ALL FEES)**.

>**CONSENT & AUTHORIZATION:** IN CONSIDERATION OF ACCEPTANCE OF MY APPLICATION FOR WINTER SWIM TEAM, I INTEND TO BE LEGALLY BOUND, NO ONLY FOR MYSELF BIT ALSO FOR MY HEIRS, MY EXECUTORS AND MY ADMINISTRATIONS. IN SIGNING THIS RELEASEST FROM LIABILITY, I WAIVE AND RELEASE EVERYONE CONNECTED WITH THIS COURSE FROM ANY AND ALL LIABILITY WHICH MAY ARISE FROM THIS COURSE.

>**REFUND POLICY:** If YMCA cancels class or program there will be a **100%** cash or program refund. If participant withdraws 1 month before the start of program **90%**cash/**100%** credit; 2 weeks prior **75%** cash/**100%** credit;1 week prior **60%** cash/**80%** credit ;Start of program **50%** cash/**75%** credit.

>**PARENT / GUARDIAN SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_



**MIDDLE  
ATLANTIC  
SWIMMING**

