



Family Last Name: _____

REGISTRATION**Fall/Winter 2010–2011**

If you are a current member of the JCC, please provide your membership number here: _____

Swimmer's Name	Practice Group	Program Fee	Discount	Amount Due After Discount
1	Highest Level	\$	None	\$
2	2 nd Highest Level	\$	- 10%	\$
3	3 rd Highest Level	\$	- 20%	\$

Total non-refundable fees payable by cash, check, or charge to: [Jewish Community Center](#): \$ _____

Payment Due: In full, by cash, check, or charge on your child's first practice, **OR** 40% due at your child's first practice payable by cash, EFT, or charge. Then, 30% will be deducted on Monday, November 15, 2010 and the remaining 30% balance will be deducted on Monday, January 10, 2011. Please be sure to complete the Payment Authorization Form and submit either a voided check or your credit card information.

Give all registration materials to either Head Coach Vladimir Dolgov or Lori Fantin. The forms will be reviewed by us and submitted to the JCC. Receipts will be obtained and returned to you after your subsequent payments have been processed.

USA SWIMMING REGISTRATION / FUNDRAISING FEE / ESCROW ACCOUNT DEPOSIT

USA Registration Fee: (\$57 per athlete) Download form from website and submit with your application	\$
USA Transfer: (if applicable) Download form from website and submit with your application	\$
COSA Registration Fee: (\$3 per athlete)	+ \$
Fundraising Fee: White: \$45 Red: \$65 Blue: \$85 Bronze: \$105 Silver: \$125 Gold: \$145 (per athlete)	+ \$
Total Non-refundable fees:	\$
Entry Fee Account Deposit: (\$50 per competing swimmer is recommended)	+ \$
Payable by cash or check to: Dynamo Swim Team = \$	

MEDICAL RELEASE**Fall/Winter 2010-2011 / Spring/Summer 2011 / Pre-Season Camps**

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE ABOVE LISTED ATHLETE(S) IS IN GOOD HEALTH AND HAS NO CONDITION WHICH WOULD IMPAIR PARTICIPATION IN THE PROGRAM. I HEREBY GIVE CONSENT FOR MY CHILD/CHILDREN TO ENGAGE IN ANY AND ALL TRAINING SESSIONS WITH DYNAMO SWIM TEAM, WHICH IS OWNED AND OPERATED BY THE JEWISH COMMUNITY CENTER (JCC), COLUMBUS, OHIO. IN CASE OF INJURY, I HEREBY GIVE DYNAMO SWIM TEAM, ITS COACHING STAFF, THE JCC AND ITS STAFF PERMISSION TO ACT ON MY BEHALF IN SEEKING MEDICAL TREATMENT FROM ANY LICENSED PHYSICIAN, HOSPITAL OR CLINIC FOR MY CHILD IN THE EVENT SUCH TREATMENT IS DEEMED NECESSARY. I GIVE PERMISSION TO THOSE ADMINISTERING MEDICAL TREATMENT TO DO SO USING METHODS DEEMED NECESSARY. I HEREBY FOREVER RELEASE AND HOLD HARMLESS THE AFOREMENTIONED PARTIES FROM ANY AND ALL CLAIMS OF ANY KIND THAT I OR MY HEIRS, EXECUTORS OR ASSIGNS MAY HAVE OR CLAIM TO HAVE RESULTING IN ANY WAY FROM MY CHILD'S PARTICIPATION IN THE SWIM PROGRAM.

Printed Name of Parent:	
Signature of Parent:	Date:
Participant Signature (If over age 18): 1.	2.



Family Last Name: _____

Last, First, Middle Initial	Group	Date of Birth	Age	T-Shirt (Youth or Adult: S/M/L/XL)
1.				
2.				
3.				

Father or Guardian	Name	Mother or Guardian
	Address	
	City, Zip Code	
	Home Phone	
	Cell Phone	
	Work Phone	
	Email Address	

If parents are unavailable, please contact the person designated below:

Contact:	Relationship:	Phone: () -
Additional comments regarding medical history: medication, allergies, drug reactions, etc. which may be useful in rendering medical treatment:		
Athlete 1. Name:		
Comments:		
Athlete 2. Name:		
Comments:		
Athlete 3. Name:		
Comments:		
DOCTOR:	Phone: () -	
Insurance Information	Policy Holder's Name:	
Company Name:	Policy Number:	
Address:	City	State: Zip:
Telephone:		



Family Last Name: _____

JCC of Greater Columbus Payment Authorization

Swimmer's Name / Practice Group	Fee Due (after discount, if applicable)
1	\$ _____
2	\$ _____
3	\$ _____
Total Non-refundable Fee Due the JCC	\$ _____

Payment Options:

- Payment in full via check*, electronic funds transfer (EFT)**, or credit card***
- Payment in 3 installments via automatic EFT**, or automatic charge to credit card***

1. _____ (day of registration) (40% of total program fee) \$ _____
2. 11/15/2010 (30% of total program fee) \$ _____
3. 01/10/2011 (30% of total program fee) \$ _____

*Checks should be made payable to 'JCC of Columbus' and submitted with this form.

**EFT (Attach Voided Check or Deposit Slip): Bank Routing Number: _____ Account Number: _____

***MC/Visa:/American Express (Circle appropriate card type):

Card Number: _____
 Expiration Date: _____
 Security Code: _____

I hereby authorize the JCC to utilize the above banking information to withdraw funds for program fees due at the specified times. I understand that a reminder notice will not be sent by Dynamo Swim Team or the JCC and that a \$35 fee will be charged for insufficient funds.

Printed Name of Parent

Signature of Parent

Date

Home Phone

Cell Phone

Jewish Community Center
 1125 College Ave
 Columbus, OH 43209
www.dynamoswimteam.org





ATHLETE CODE OF CONDUCT

As a representative of the Dynamo Swim Team (DST), Ohio Swimming LSC, and USA Swimming, I will abide by the standards of conduct outlined below.

1. **I understand** the possession or use of alcohol, tobacco products or controlled substances by any athlete is prohibited.
2. **I will** display proper respect to my coaches, parents, officials, and peers.
3. **I will** demonstrate high moral standards, exemplary social conduct, and good sportsmanship.
4. **I will** refrain from any illegal or inappropriate behavior that would detract from a positive image of DST, Ohio Swimming LSC, USA Swimming, or interfere with Dynamo Swim Team's performance objectives.

I will be a positive DST member:

1. **I will** work hard and encourage others.
2. **I will** be punctual to team practices, meetings and warm-ups.
3. **I understand** the transition time from stretches to swimming should be limited to 5 minutes.
4. **I will not** disturb other swimmer's practice, and will talk respectfully to everyone.
5. **I will** look, listen, and watch the coaches while they are giving instructions.
6. **I will not** talk back to a coach, parent, or official.
7. **I will** support all of my teammates.
8. **I will** offer congratulations to opponents, win or lose, and cheer for fellow teammates.
9. **I agree** to abide by the rules and guidelines as set forth by the coaches, USA Swimming, and the JCC.

While attending out-of-town meets:

1. **I understand** that no loud or boisterous behavior will be tolerated in the hallways or public areas of the hotel, and such behavior should be kept to a minimum in my room.
2. **I agree** no male and female athletes will be in the same room together unless a coach, parent, or chaperone is in the room or has approved the situation.
3. **I understand** that any display of romantic affection is not allowed.
4. **I agree** to follow any additional guidelines that may be established as needed by the coach of record.

IMPLEMENTATION

My signature constitutes unconditional agreement to comply with the Dynamo Swim Team Code of Conduct and failure to comply may result in disciplinary action.

Disciplinary action may include, but is not limited to:

1. Dismissal from practice and/or dismissal from the team.
2. Disqualification from one or more events of competition and/or disqualification from future DST travel.
3. Financial penalties: lost entry fees, etc.)
4. Any other action deemed appropriate by the coaching staff. The coaching staff holds the final word on any rules, regulations, or disciplinary action that will be taken.

Athlete #1 Signature:	Printed Name:	Date:
Athlete #2 Signature:	Printed Name:	Date:
Athlete #3 Signature:	Printed Name:	Date:
Parent Signature:	Printed Name:	Date:



PARENT CODE OF CONDUCT

As a parent or legal guardian of a swimmer or swimmers and a member of the Dynamo Swim Team (DST), I agree to abide by the standards of conduct and following guidelines and obligations:

1. **I WILL** practice teamwork with all parents, swimmers, and coaches by supporting the values of discipline, loyalty, commitment and hard work.
2. **I WILL NOT** coach or instruct the team or any swimmer(s) at any practices or meets, from the stands or any other area, or interfere with the coaches and officials on the pool deck, unless requested to do so by the coaching staff.
3. **I WILL** demonstrate good sportsmanship by conducting myself in a manner that earns the respect of my child or children, other swimmers, parents, officials, and coaches at meets and practices.
4. **I understand** that criticizing, name-calling, and using abusive language or gestures directed toward coaches, officials, and/or swimmers will not be permitted or tolerated.
5. **During meets**, I will direct questions or concerns regarding decisions made by meet officials to a member of our coaching staff, not to the officials.
6. **I WILL** support the swimmers, coaches and other parents with positive communication and actions.
7. **I WILL** ensure that all payments due either DST or the Jewish Community Center (JCC) are made by established deadlines so the team is able to meet its obligations relating to coaching salaries, pool rental, meet entries, and other financial commitments. I understand that a positive balance must be kept in my child's entry fee account in order for them to be entered in swim meets.

Should I or my child conduct ourselves in such a way that brings discredit or discord to the DST, Ohio Swimming, or USA Swimming, I understand that I or my child may be subject to disciplinary action. I grant the DST Coaching Staff disciplinary authority.

DST maintains the rights to sanction, suspend, or remove from the team any members violating codes of conduct. The DST coaching staff shall have the discretion and power to take action as it may deem proper with reference to the removal, suspension, or reinstatement of team members.

Swimmers are strongly encouraged to participate in appropriate level meets upon advice from the swimmer's coach. Swimmers are expected to participate in the highest level championship meet for which they qualify. Absence should be communicated to the coach. Novice swimmers are not expected to participate in meets unless they so desire.

Printed Name of Parent:

Signature of Parent:

Date:

Printed Name of Parent:

Signature of Parent:

Date:

This document will remain on file as long as you are affiliated with Dynamo Swim Team