## OJAI HEAT WAVES SWIM TEAM



## 2018 Registration Form

| Swimmers Name:                        | vimmers Name:S    |                            | tart date: |  |
|---------------------------------------|-------------------|----------------------------|------------|--|
| Parents Name/s:                       | /                 |                            |            |  |
| Home Phone:                           | Additional Phone: |                            |            |  |
| Address:                              |                   |                            |            |  |
| E-MAIL                                |                   |                            |            |  |
| (email-is required for communication) |                   |                            |            |  |
| Swimmers Date of Birth:               | Age:              | Sibling Discount(circle) Y | N          |  |
| OVAC Member(circle) Y                 | N Membership      | Number :                   |            |  |
| Payment Options : (circle)            | MONTH SEASO       | N                          |            |  |
|                                       | MEMREDS           | NON MEMBEDS                |            |  |

|                      | MEMBERS |       | NON- MEMBERS |          |
|----------------------|---------|-------|--------------|----------|
|                      | JI      | JII   | JA           |          |
| SEASON<br>(12 weeks) | \$260   | \$305 | \$320        | Add \$75 |
| MONTHLY<br>(4 weeks) | \$90    | \$105 | \$110        | Add \$25 |

**MEMBERS:** Payments will be charged to your OVAC account by the 10<sup>th</sup> of the month unless other payment arrangements have been made prior to the 10<sup>th</sup>. We do not offer drop-in classes. Quitting must be communicated the prior month or your account will be charged regardless of attendance. Monthly payments are calculated by 4 week months and there is no prorating, half months, refunds or sick make-ups. Illness with a doctor's note will be offered a makeup session.

**NON-MEMBERS**: **Payments must be made prior to swimming**. Monthly payments are calculated by 4 week months and there is no prorating, half months, refunds or sick make-ups. Non-member must adhere to and sign the non-member swim policy attached in this packet.

**SIBLING DISCOUNT:** All families that have a paying sibling on the team will receive a \$5 monthly or \$15.00 seasonally discount per additional sibling. Siblings must be enrolled in the same season/month Please note on the registration form above that the swimmer qualifies for the sibling discount.

| ☐ Please charge my credit card  |
|---|
| (circle) Visa MasterCard AMEX   |
| Name on   |
| Card  |
| CVV code  |
| Card  |
| Number  |
| Exp Date (mm/yy)  |
| I give OVAC the permission to charge my card for the swim lesson registration fee in the amount   |
| \$  |
|   |
| I agree to the above billing policy.  |
| Parent Signature Date   |
|   |
|   |
|   |
|   |
| Procedure for Disciplinary Action   |
|   |
|   |
| We strive to create a positive environment for your swimmer and expect swimmers to come to practice ready to swim an participate in the planned activities. The Head Coach should always be notified about any problems or concerns with swimmers, coaches and/or parents. Below are the procedures for disciplinary action for swimmers. |
| 1. The swimmer receives a verbal warning from the coach.  |
| 2. The swimmer will be asked to sit out of the pool on the deck. This may include some physical activity  |
| including, push-ups, sit-ups or lunges, (age appropriate).  |
| 3. The swimmer will be asked to leave the pool area and the head coach will contact the parent.   |
|   |
|   |
| Parent Signature Date   |
| <del></del>   |



## **Non-Member Swim Policy**

OVAC welcomes non-members to our Swim Program!

- 1. All non-members must **sign-in** *and* **out stating the time at the front desk** on the Non Member Sign-In Sheet.
- 2. All non-members must have a signed Swim Program registration form & liability waiver on file.
- 3. All non-members must also sign a liability waiver at the front desk annually.
- 4. Only non-members who are currently enrolled in swim lessons or swim team may enter the club. Parents who wish to watch **must sign/out at the front desk also.**
- 5. Non-members may only arrive **15 minutes** before the lesson/ class begins and **must leave 15 minutes** after lesson/class is over.
- 6. Only the child enrolled in the swim lesson/class may use the pool designated for the class. No other family members are allowed to use any OVAC pool unless they pay a guest fee.
- 7. Non-members are required to comply with all OVAC pool rules and regulations.
- 8. Non-member must pay class fees **PRIOR** to attendance.
- 9. If non-members wish to use the pool after lessons, they must pay a guest fee each day.
- 10. Only non-members who follow these procedures will be allowed to participate in the program.
- 11. If non-members fail to check in at the front desk or do not adhere to this policy they will lose their ability to participate in OVAC swim programs.

## Thank you for participating in our Swim Program!

| As a Non-Member guest of the facility, I agree to follow all club rules with my child who is currently enrolled in the swim program. I agree to follow all the Non-Members policies as describes above. |                  |  |  |  |  |  |  |
|---|------------------|--|--|--|--|--|--|
| Name of child (please print)  | Parent Signature |  |  |  |  |  |  |
| Date  |                  |  |  |  |  |  |  |

| Medical Authorization and Concept to Treat   |            |
|--|------------|
| Medical Authorization and Consent to Treat  Durayant to Colifornia Family Code 6550 and 6010. I  | al.        |
| Pursuant to California Family Code 6550 and 6910, I,, a parent or legal guardian having legal custody of the following minor child:, hereby authorize Ojai Valley Athletic Club, to  | الد        |
| consent to any X-ray examination (or similar examination such as by CAT/MRI scan), anesthetic, medical, dental, or   |            |
| surgical diagnosis or treatment and hospital care to be rendered to the minor children listed above under the general or   | ,          |
| special supervision of a qualified physician, surgeon, or dentist I agree to pay any and all costs for the foregoing. I have   |            |
| no knowledge of any physical or mental impairment that would affect the Participant's ability to participate in this activity  |            |
| The knowledge of any priyologi of mental impairment that would alloot the ratio part of ability to participate in this activity  | •          |
| DATE SIGNATURE   |            |
| France Accompation of Biole Assessment and Bolooce of Linkilly, and Indonesity Assessment  |            |
| Express Assumption of Risk Agreement and Release of Liability and Indemnity Agreement  |            |
| I, the Responsible Party, on my own behalf, and behalf of all others who are listed as Participants, under this  |            |
| Agreement, including my unborn and/or minor children, and my and their personal representatives, assigns, successors   |            |
| heirs, and next of kin, (hereafter collectively referred to as the "Participants"), acknowledge and agree that the use of the  |            |
| facilities, services, equipment or premises of Ojai Valley Athletic Club (the "Club") by any of the Participants involves ris of injury to persons and property, and the Participants assume full responsibility for such risks for myself/themselves. T |            |
| Participants agree and acknowledge that I/they have entered into the Agreement for use of the Club's facilities, services  |            |
| equipment, or premises primarily for recreational purposes and not to use any specific piece of equipment or training  | э,         |
| methodology. In consideration of being permitted to enter the Club's facilities for any purpose, including, but not limited  | l to       |
| observation, use of facilities, services, or equipment, or participation in any way, the Participants agree to the following:  |            |
| the Participants are authorized to, and do hereby release and hold the Club, its and their directors, shareholders, office   |            |
| parents, subsidiaries, employees, members, managers, independent contractors, and agents harmless from all liability   |            |
| all the Participants, and any of my/their personal representatives, assigns, heirs, and next of kin from any loss or damage  |            |
| sustained by any of the Participants. The Participants hereby waive any claim or demands therefore based on, or on   | <i>y</i> - |
| account of, any injury or death to any of the Participants and property damages sustained by any of the Participants,  |            |
| whether caused by the active or passive negligence of the Club or otherwise, while any of the Participants is in, upon, or   | r          |
| about the Club's premises, or while using the Club's facilities, services, or equipment or while participating in any Club   |            |
| activity at any location.  |            |
| This Express Assumption of Risk Agreement and Release of Liability and Indemnity Agreement (the "Release")   | ),         |
| includes, but is not limited to, claims based on the following: the Club's improper maintenance of its equipment   |            |
| (mechanical or otherwise), grounds or facilities, negligent instruction or supervision, including personal training, or  |            |
| inadequate security or staffing, the Participant's use of the Club's facilities, services, or equipment, and/or slipping or  |            |
| tripping anywhere in or about the Club or any location in which the Club operates, including, but not limited to public  |            |
| facilities. Such facilities include, but are not limited to: exercise equipment, exercise rooms, weight rooms, locker rooms  |            |
| sidewalks, parking lots, stairs, pools, whirlpools, spas, saunas, tennis courts or lobby area. Such risk of injury includes, but is not limited to injuries original from the participation by any of the Participants, or others in supervised or       | ,          |
| but is not limited to injuries arising from the participation by any of the Participants, or others in supervised or unsupervised activities at the Club, injuries and medical disorders, including, but not limited to death, heart attacks,            |            |
| strokes, heat stress, sprains, broken bones, and injured muscles and ligaments, among others, arising from exercising,   |            |
| any recreational use of any of the Club's facilities, or otherwise, or while participating in any of the Club's programs,  |            |
| classes, or activities, and accidental injuries occurring anywhere in or about the Club, including its dressing rooms,   |            |
| showers and other facilities.  |            |
| The Participants also agree to indemnify and hold the Club harmless from any loss, liability, damage or cost that  | at         |
| the Club may incur due to the presence of any of the Participants in, upon, or about the Club's premises or in any way   |            |
| observing or using any of the Club's facilities, services or equipment, whether caused by a Participant's negligence or  |            |
| otherwise. The Participants further expressly agree that the Release is intended to be as broad and as inclusive as  |            |
| permitted by the law of the state of California, and that if any portion of the foregoing Release is held invalid by a court   | of         |
| law, then that portion shall be deemed stricken and it is agreed that the remainder of the Release shall continue in full  |            |
| force and effect without the invalid portion.  |            |
| On behalf of the Participants, I acknowledge that I have carefully read this Release and fully understand that it  | is         |
| a release of liability, and express assumption of risk and indemnity agreement. I am aware and agree that by executing   |            |
| this Release, I, and all of the Participants are giving up any rights I or any and all of the Participants may have to bring a   | a          |
| legal action or assert a claim against the Club for its active or passive negligence, or for any defective product of its  |            |
| premises.  |            |
| I represent that I have the actual authority to, and do hereby enter into this Release on my behalf and as an  |            |
| authorized agent, or parent or legal guardian for all of the Participants. I have read and voluntarily signed this Release   |            |
| and I further agree that no oral representatives, statements or inducement apart from the foregoing Release have been  | i          |
| made to me.  |            |
|  |            |
| Responsible Party Signature Date   |            |