

**WINE COUNTRY AQUATICS OF NAPA
WCAN
www.wcanswim.org**

Membership Application & Certification

Purpose: The purpose of this form is to ensure members fully understand their financial and family commitments as members of WCAN.

Annual Family Commitment Fee: Payable annually on October 1st, \$100 per family. This fee is Non-Refundable

Monthly Dues: Dues are required on a monthly basis, payable by the 1st of each month. We do not send out monthly statements. Payments received after the 10th of the month are considered late and will result in a \$25 late charge.
(Please see attached lists of programs, fees and policies.)

Any portion of a month shall be considered a full month active swimming and dues will be assessed. Athletes choosing to withdraw or requesting inactive status must notify the Treasurer by the 1st of the month. Monthly dues are payable until such notification is received.

We are requesting that dues be mailed to: WCAN, PO Box 5582, Napa, CA 94581.

Application of Membership Dues: Membership dues are used to pay for pool usage fees, team equipment, coaching salaries and miscellaneous operating expenses. WCAN is a non-profit corporation.

Annual USA/Pacific Swimming Registration Fees: A \$65 non-refundable annual (currently \$45 seasonal) registration fee is required for each swimmer. This fee covers the cost of U.S.A. Swimming club and coach insurance, membership and administrative costs. Make your check payable to **Pacific Swimming** for this fee.

Fund-raisers: Our goal is to host at least one swim meet per year. It is expected that each family will contribute time and talent to these or other fund-raising events, regardless of whether a swimmer has active or inactive status. Should the Board of Directors decide other fund-raisers are necessary; families will be notified by email and are asked to participate. Failure to participate in fund-raising activities may result in an assessment of \$100 per event.

Certification Statement: I have read and understand the above and do acknowledge financial responsibility for my membership, as is now certified by the signature below:

Member's Signature: (Parent's signature unless swimmer is at least 18 years of age)

Date signed: _____

RETURN THIS COPY WITH COMPLETED REGISTRATION FORMS

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RETAIN THIS COPY FOR YOUR FAMILY'S RECORDS