

WINE COUNTRY AQUATICS OF NAPA
WCAN
www.wcanswim.org

Annual Registration Information

Attached are current U.S.A./Pacific Swimming membership, WCAN membership information, medical release and certification forms. Return completed forms to the pool at the next practice.

****Please understand we must have all forms completed and current registration paid for the purpose of insurance coverage before a swimmer is allowed in the pool.****

Pacific Swimming Membership: Please fill out form and **attach a check made payable to Pacific Swimming** in the amount of \$65 for each swimmer in your family. (For seasonal only/ partial year registration - \$45)

- Enter the legal first name of the swimmer. If the swimmer wants to use a "nickname" instead, enter that name as the "preferred name". The preferred name will appear on the registration card and can be used to enter meets.
- Information about "other swimming affiliation" and "ethnicity" is strictly optional and does not need to be provided.

Medical Release: Complete one form per swimmer.

Membership Information: Include telephone and cell phone numbers where you can be reached as well as email addresses.

WCAN Membership Application and Certification: Read carefully all information concerning dues, annual family commitment fee and responsibilities to team. Parental signature is required for all swimmers under 18 years of age. Retain the parent copy for your records.

If you have any questions concerning registration forms, please contact Russ Ricetti 226-8891 or via e mail at ricetti@wcanswim.org

**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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WCAN
www.wcanswim.org**

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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: _____

RETAIN THIS COPY FOR YOUR FAMILY'S RECORDS

WINE COUNTRY AQUATICS OF NAPA (WCAN)
www.wcanswim.org

MEMBERSHIP INFORMATION

NAME: (Last, First, Middle)

Swimmer #1: _____ / _____ / _____
(Birthdate) (Age)

Swimmer #2: _____ / _____ / _____
(Birthdate) (Age)

Swimmer #3: _____ / _____ / _____
(Birthdate) (Age)

Swimmer #4: _____ / _____ / _____
(Birthdate) (Age)

PARENT(S):

FATHER Name: _____ Phone: _____

Address: _____ (Street/City/Zip)

Cell phone number: _____

Email address: _____

MOTHER Name: _____ Phone: _____

Address: _____ (Street/City/Zip)

Cell phone number: _____

Email address: _____

FOR CLUB USE ONLY

Sign up date: _____

Swimmer #1 _____ PacSwim _____ Medical _____ FamComm _____ Group

Swimmer #2 _____ PacSwim _____ Medical _____ FamComm _____ Group

Swimmer #3 _____ PacSwim _____ Medical _____ FamComm _____ Group

Swimmer #4 _____ PacSwim _____ Medical _____ FamComm _____ Group

**WINE COUNTRY AQUATICS OF NAPA
DELINQUENT DUES, FAMILY COMMITMENT & INACTIVITY POLICIES**

DUES

EFFECTIVE MARCH 1, 2009, ALL DUES MUST BE SENT TO THE TEAM'S POST OFFICE BOX. THE MAILING ADDRESS IS: WCAN, P.O. BOX 5582, NAPA, CA 94581

All Dues are due on the 1st of the month. **We do not send monthly bills.** All dues not received by WCAN by the 10th of the month will be considered delinquent and a \$25 late penalty will be assessed.

If payment is not received by the 15th of the month, your swimmer will not be allowed in the pool at practice. Swimmer will be allowed back into the pool once your account is current.

FAMILY COMMITMENT

The annual Family Commitment Fee of \$100 is due on October 1st of each year. Families returning to WCAN for any reason will be assessed the standard \$100 FC fee regardless of when they return.

A pro-rated family commitment fee will be assessed to families new to WCAN only. This pro-rated fee will be assessed based on the start date of the family.

INACTIVITY

Swimmers choosing to withdraw from the team or requesting to go on inactive status must notify the Treasurer and Assistant Secretary **BEFORE** the 1st of the month in which the inactivity is to begin. Monthly dues are payable if notification is not made to the appropriate parties. Swimming for any portion of a month shall be considered a full month of active swimming and dues shall be paid.

Notification of inactivity or withdrawal can be mailed to the address at P.O. Box 5582, Napa, CA 94581 and can also be made via email. This notification must be **RECEIVED** by WCAN prior to the month when inactivity will commence.

Current email addresses for the WCAN Board of Directors can be found at the team website at <http://www.wcanswim.org/contact.html> . Please do not hesitate to contact the appropriate board member to discuss any financial or other issues you may have.

WCAN Swimmer Code of Conduct

The purpose of a code of conduct is to ensure that WCAN can provide a positive environment for the development of all swimmers, regardless of age or ability. WCAN also strives to develop each swimmer as an athlete, an individual, a member of the WCAN team, and a member of the community.

The following code of conduct is in accordance with recommendations made by USA Swimming and the American Swim Coaches Association. As a member of the WCAN swim team, I understand and will comply with the following guidelines.

- * Each swimmer's conduct at practices and swim meets should support every other swimmer's ability to learn and the coach's ability to teach other swimmers.
- * Each swimmer should be committed to working hard and striving to achieve personal goals.
- * Each swimmer should represent the WCAN team with excellence, team spirit, good sportsmanship, politeness and respect at all times.
- * Each swimmer should be punctual and prepared for all practices and meets.
- * Each swimmer is expected at all times to follow the directions of any WCAN coach and any adult serving as a chaperone.
- * Each swimmer is expected to use appropriate language at all times. Physically or verbally abusive behavior is unacceptable and will not be tolerated.
- * Each swimmer is strictly prohibited from the use or possession of weapons, alcohol, tobacco products, illegal drugs or any substance banned by USA Swimming or FINA.
- * Each swimmer is expected at all times to respect each other and every member of the WCAN family, including all swimmers, coaches, parents and siblings. Respect must also be extended to competitors, swim officials, timers and all other individuals at swim meets.
- * Each swimmer is expected to respect and care for the property of others; including personal property, swim equipment, team equipment, and the entire pool and locker room facility.

Any disregard for any part of this code of conduct may result in disciplinary action ranging from a verbal warning to dismissal from WCAN (see disciplinary guidelines).

I am proud to be a WCAN Emperor! Let's have fun and swim FAST!

WCAN Disciplinary Guidelines

Violation of any of these Conduct rules may result in disciplinary actions by WCAN, up to and including removal from the Club. Actions taken, if any, will be determined by WCAN in its sole discretion. Such actions may include (but are not limited to) the following:

- **Verbal warning and reminder of team rules** to the offending swimmer by his/her coach. The athlete may be asked to leave for the remainder of their workout depending upon the severity of the incident.
- **Verbal warning and reminder of team rules with parent notification** to the offending swimmer by his/her coach. The athlete may be asked to leave for the remainder of their workout depending upon the severity of the incident. A notification of parent/guardian will be made by that coach to each parent/guardian involved.
- If a violation occurs during a swim meet, the swimmer may be **scratched from that meet** and the swimmer's parent will be asked to take the swimmer home. Any costs associated with a swimmer's early departure due to a violation shall be borne by the parents.
- **Suspension from WCAN.** The length of the suspension will be determined by the Head Coach and Board President, after consultation with the swimmer's coach. **No refunds of any fees will be made in the event of a suspension.**
- **Removal from the club** under the direction of the WCAN Board of Directors. **No refunds of any fees will be made in the event of a suspension.**

WCAN does not guarantee that one form of action will necessarily precede another and reserves the right to terminate the membership at any time depending upon the totality of the circumstances.

The Board of Directors reserves the right to review all disciplinary matters at any time.

Swimmer: I have read and agree to act in accordance with the above Code of Conduct expectations and guidelines. I understand the disciplinary consequences of not following the Code of Conduct.

Signature: _____

Date: _____

Parent: I have read and understand the above Code of Conduct. I understand the disciplinary consequences that will occur as a result of my child not following the Code of Conduct.

Signature: _____

Date: _____

WCAN Parent Code of Conduct

WCAN is fortunate to have highly experienced, professional coaches working to develop our children into better swimmers, and more importantly, disciplined young people. As parents, it is absolutely essential that we give our coaching staff the respect and authority they deserve to coach our children and run our swim team.

The following code of conduct is in accordance with recommendations made by USA Swimming and the American Swim Coaches Association. As a parent of a swimmer and a member of the WCAN swim team, I understand and will abide by the following guidelines.

** As a parent, I will support the values of Discipline, Loyalty, Commitment, Hard Work and Teamwork during each practice, swim meets and other swimming events and in dealings with all coaches, parents, swimmers and officials.

** As a parent, I will demonstrate good sportsmanship and teamwork, conducting myself in a manner that earns the respect of my child, other swimmers, parents, officials and the coaches at meets and practices.

** As a parent, I will not coach or instruct the team or any swimmer at practice or meets (from the stands or any other area) or interfere with coaches on the pool deck.

** As a parent, I will get my swimmer(s) to practice and meets on time and ready to swim.

** As a parent, I will maintain self-control at all times, and I will know my role. Swimmers swim; Coaches coach; Officials officiate; Parents parent (love and support).

** As a parent, I will insist that my child(ren) refrain from using alcohol, tobacco, drugs or other prohibited substances or from engaging in any inappropriate language or behavior.

** As a parent, I will direct questions, concerns and suggestions to a member of the coaching staff in private during normal business hours or before or after practice or meets. I will not interrupt a coach on the pool deck.

** As a parent, I understand that swim officials have the best interest of all swimmers in mind, and I will communicate with swim officials through the coaching staff ONLY.

** As a parent, I understand that participation by my child(ren) in swimming is voluntary and participation in meets and events shall not be forced. I will trust and support my swimmer and coach's decisions around goal setting and training, and I will not impose my own ambitions on my swimmer(s).

** As a parent, I will volunteer to help with fundraising and other team events, fulfill my timing duties at swim meets, and when possible, assist with set-up and take-down at swim meets and practices, including canopies, lane lines, pool covers and timing clocks.

** As a parent, I will pay my fees on time, remembering to use the P.O. Box unless otherwise arranged. I will not ask/expect the coaching staff to accept payments on the pool deck.

** As a parent, I will enjoy my involvement with WCAN by supporting the swimmers, coaches, board members and other parents with positive communications and actions.

Parent name (please print)_____

Parent signature _____ Date_____

Parent name (please print)_____

Parent signature _____ Date_____



USA SWIMMING

2012 ATHLETE REGISTRATION APPLICATION

LSC: : PACIFIC SWIMMING (PC)

REG. DATE / OFFICE USE ONLY

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PLEASE PRINT LEGIBLY ● COMPLETE ALL INFORMATION:

LAST NAME			LEGAL FIRST NAME			MIDDLE NAME		

PREFERRED NAME	DATE OF BIRTH (MO./DAY/YR.)	SEX (M/F)	AGE	CLUB CODE	NAME OF CLUB YOU REPRESENT

FATHER/GUARDIAN LAST NAME	FATHER/GUARDIAN FIRST NAME	MOTHER/GUARDIAN LAST NAME	MOTHER/GUARDIAN FIRST NAME

MAILING ADDRESS

CITY	STATE	ZIP CODE

AREA CODE	TELEPHONE NO.	FAMILY/HOUSEHOLD E-MAIL ADDRESS

- DISABILITY:**
- A. Legally Blind or Visually Impaired
 - B. Deaf or Hard of Hearing
 - C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment
 - D. Cognitive Disability such as severe learning disorder, autism

- RACE AND ETHNICITY** (You may make up to two choices if appropriate):
- Q. Black or African American
 - R. Asian
 - S. White
 - T. Hispanic or Latino
 - U. American Indian & Alaska Native
 - V. Some Other Race
 - W. Native Hawaiian & Other Pacific Islander

MAKE CHECK PAYABLE TO:

PACIFIC SWIMMING

MAIL APPLICATION & PAYMENT TO:

**PACIFIC SWIMMING REGISTRATION
1034 WOODSTOCK COURT
WALNUT CREEK, CA 94598**

**EMAIL: judy4pc@pacbell.net
925-933-0395 fax: 925-935-5528**

U.S. CITIZEN: YES NO

ARE YOU A MEMBER OF ANOTHER FINA FEDERATION? YES NO
IF YES, WHICH FEDERATION: _____

HAVE YOU REPRESENTED THAT FEDERATION AT INTERNATIONAL COMPETITION? YES NO

REGISTRATION FEE	
USA Swimming Fee	\$48.00
LSC Fee	\$17.00
TOTAL DUE	\$65.00

YEAR LAST REGISTERED: _____. IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2011, ENTER THAT CLUB CODE: _____ LSC CODE: _____ AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB: _____

HIGH SCHOOL STUDENTS – Year of high school graduation: _____

SIGN
HERE x _____
SIGNATURE OF ATHLETE, PARENT OR GUARDIAN

USA Swimming occasionally makes its membership list available to its marketing partners. Please notify USA Swimming's Member Services Dept. at 719/866-4578 if you do not wish to receive these mailings.

- Check if you would like to learn more about the USA Swimming Foundation's initiatives
- Check if you would like to receive the electronic USA Swimming Newsletter (must be 13 years of age or older)

~~~~~Please cut form on the line above~~~~~