



**WHITCHURCH-STOUFFVILLE SWIM CLUB
2018-2019 Season
MASTERS REGISTRATION**

Swimmer's Name: _____ M F Date of Birth: (DD) ____ (MM) ____ (YY) ____ Age: _____

Address: _____ City: _____ ON, Postal Code: _____

Home #: _____ Cell #: _____ Email: _____

Family Doctor: _____ Phone #: _____

Medical conditions/information: _____ Medications (Inhaler/EPI etc): _____

MASTERS: Tuesday/Thursday/Saturday: 6:05-7:35 a.m.	<input type="checkbox"/> 3 times per week - \$500.00	<input type="checkbox"/> 1-2 times per week - \$400.00
	PLUS Masters Swim Ontario Fee: <input type="checkbox"/> Competitive: \$61.00 <input type="checkbox"/> Non-Competitive \$16.00	
What are you hoping to achieve: <input type="checkbox"/> Fitness <input type="checkbox"/> Competitive <input type="checkbox"/> Improve endurance for triathlon <input type="checkbox"/> Other: _____		

The Membership Application, Agreement and Release of Liability, PIPEDA Forms and payment must be received to complete registration.

The registration package is to be completed and submitted to complete the registration process. No member will be allowed to train until the forms and payment have been received.

I, the undersigned apply for membership in the Whitchurch-Stouffville Swim Club and agree to be subject to the following terms and conditions.

- I hereby make application for the above swimmer to be registered as a Swimming Member of the Whitchurch-Stouffville Swim Club and will abide by the Code of Conduct and the policies as outlined in the Club's Membership Handbook which is available on the website www.stouffvilleswimclub.com in the Members Only section. Password will be assigned once swimmer is registered.
- I agree to the **REFUND POLICY**: On withdrawal, the swimmer will be charged for the number of months or part months that they have attended **PLUS** one month, Swim Ontario fees are non-refundable. **Withdrawal begins on receipt of written notification.** If withdrawal occurs within 2 weeks from registration, there will be a full refund less an Administration fee (\$10/practice, minimum \$50). There will be no refund of fees after December 31, 2017. After this date, any fees due for the remainder of the season will be payable in full upon withdrawal.
- **NSF CHARGES** of \$30.00 and **LATE PAYMENT CHARGES** of \$25.00. **Any regular fees that are 30 days in arrears will result in the swimmer being denied access to practices, until the account is in good standing.**
- **I understand that practice schedules and locations are subject to change** at the discretion of the Head Coach.
- I give permission to enter and maintain required personal information on the Swimming Canada & WSSC database for the purposes outlined in Swim Ontario's policy. I authorize the chaperon, and/or coach(es) to take any action they deem necessary in an emergency.
- I, the undersigned, do hereby release and agree to indemnify and save harmless the, Whitchurch-Stouffville Swim Club, Nick Rottmann, and their officers, employees or agents, and each and every Board Member thereof, from all claims for loss, injury or damage, to persons and property while participating in or traveling to and from Swim Club activities, which I, or any person claiming through me or my behalf, may at any time have arising out of or connected with the operation of this activity.

(Print Name)

(Signature)

(Date)

OFFICE USE ONLY: PAYMENT RECEIVED: _____ PAYMENT TYPE: Cheque # _____ E-transfer Ref# _____
 TOTAL REGISTRATION: \$ _____ S/O FEE: \$ _____



Personal Information Protection & Electronic Documents Act

SWIMMER REGISTRATION CONSENT FORM

Club Name _____

Registrant Name _____

Please Read Carefully; complete and sign this form.

A Parent or Legal Guardian must sign for those registrants under the age of 18.

The Canadian Personal Information Protection & Electronic Documents Act (and equivalent provincial legislation) requires that consent be obtained prior to the collection and use of all personal information.

The personal information you provide to the Club from this registration will be used for the purposes reasonably associated with the swimming activities conducted by the Club, the Province and/or Swimming/Natation Canada (SNC). These purposes include national, provincial and event registration, insurance coverage, training and competition participation and competition result publication. The information you provide is for purposes including association registration, insurance coverage and:

- a) Ensuring swimmers train and compete in an age appropriate environment;
- b) Establishing athlete eligibility for selection to swim teams;
- c) Establishing pertinent medical records and baseline performance data to assist coaching decisions in a national team competitive or training setting;
- d) Reporting non-identifying, demographic and participation statistics to funders, sponsors and other authorized third parties;
- e) Reporting and publishing athletes' name, gender, age, club affiliation on Swimming Canada web pages or in results, news releases and ranking reports and;
- f) Making direct contact with registrants, volunteers and staff as necessary for the operations of the Club, Swim Ontario and SNC.

Swimming Canada complies with the obligation and responsibility to the World Anti-Doping Agency - WADA (or its agents) to provide information upon request.

Additional personal information may be collected from time to time. Consent for the use of this personal information may be inferred where its uses are obvious and it has been voluntarily provided. When not obvious, the purposes for collection will be provided prior to, or at the time of collection; either orally or in writing.

Complete texts of the Privacy/Personal Information Policies (variously the "Policy" or the "Policies") may be found for SNC at: <https://www.swimming.ca/Privacy> and for Swim Ontario at www.swimontario.com

Should a registrant wish to review their personal information held by the Club, Swim Ontario, or SNC they must make a request to the appropriate organization pursuant to that organization's Policy. Further, registrants may withdraw consent to use their personal information pursuant to the Policies. Such a withdrawal however, may require the cancellation of registration with and suspension of activities with the Club, Swim Ontario and SNC. All registrants or their legal guardian must sign a copy of this form each season.

I hereby consent to the collection and use of personal information as described above.

Signature of Registrant (age 18 or older) or Parent/Guardian

Date