



SPLASH AQUATICS

REGISTRATION, WAIVER, and CONSENT FORM

INSTRUCTIONS:

1. Complete form and sign pages 3, 4 & 5
 - a. Choose the preferred pool location on the top of page 1
(NOTE: location may differ from preference)
 - b. Obtain swim group category and signature from your tryout coach on page 3
2. Return completed & signed forms within 1 week of joining to:
 - a. Your Coach
 - b. President Jessica Takara or their designee
 - c. or email to the team registrar at registrar@splashaquatics.org
3. Provide a copy/scan/photo of swimmer(s) Birth Certificate or Passport.
4. For questions on Splash Waiver & Consent form or USA Swimming Registration – email registrar at registrar@splashaquatics.org

Expected fees upon joining: (Splash Treasurer will bill you)

- First month's fee (\$75-\$110) per child, depending on which group your child is in).
- One time Club Registration Fee - \$75.00.

Expected fees after joining:

- Splash Monthly fee (\$75-\$110) per child, depending on which group your child is in).
- Meet related fees, if your child swims in a meet in the month prior.
- A late fee of \$5.00 will be assessed in the following months bill if payment has not been received by the 10th of the previous month.



**REGISTRATION, CLUB RULES, MEDICAL INFORMATION AND CONSENT
TO TREATMENT, WAIVER / RELEASE OF LIABILITY (5 pages)**

Swimmer Information:

☐

Pearl City (Manana) Pool

☐

McCully Pool

☐

Kapaolono Pool

*Last Name

*First Name

*Middle Name
(if applicable)

*Birthdate
(MM/DD/YY)

Preferred First Name (i.e., nickname - only if different from First Name)

☐

Male

☐

Female

*Check applicable box

*Address

*City

*State

*Zip Code

*Home or Main phone number

Cell Phone

*Log in Email

Additional email(s) (please provide preferred email to be used for all club email correspondence – up to 3)

Parent / Guardian Information:

Mother/Guardian:

*Last Name

*First Name

*Cell Phone

Work Phone

Email

Father/Guardian:

*Last Name

*First Name

*Cell Phone

Work Phone

Email

Parent/Guardian Account Name under:

☐

Mother/Guardian

☐

Father/Guardian

☐

Both (i.e.: Maile & Kalani)

*Required Information. For phone numbers and email addresses, please list only those that you consent to be used for club email correspondence and published in the club roster that is distributed to all club members.

A copy of the signed Acknowledgement of Club Information & Rules will be returned to you for your reference, if requested.

ACKNOWLEDGEMENT OF CLUB INFORMATION & RULES

Splash Aquatics Swim Groups: Eligibility for each group is at the discretion of the Coaches, based on, but not limited to: **Age, Physical Strength, Psychological State and Maturity.**

Monthly Dues	Group Name	Training	Group Description
\$75.00	Develop-mental	Pool time only	Beginning swimmers who can display basic swimming ability and have little competitive experience. Emphasis on technique training. Will compete in BC level meets when coaches feel they are ready.
\$95.00	Age Group	Dry land & Pool Time	Swimmers who know most or all of the four (4) competitive swim strokes (freestyle, backstroke, breaststroke, butterfly) and will continue to build their aerobic base and conditioning, refine their skills and begin to focus on race strategy. Will regularly compete at A+ level meets and above. Goal is to compete at the State Championship level.
\$100.00	Junior	Dry land & Pool Time	Swimmers who have begun to exhibit a high level of proficiency in all four (4) strokes who continue to strengthen their aerobic base and conditioning and refine their stroke technique and race strategy. Will regularly compete in A+ meets and above. Goal is to compete at the State & Regional Zone Championship level.
\$110.00	Senior	Dry land & Pool Time	Advanced swimmers committed to competing at an elite level, able to continually handle rigorous, demanding workouts, and strive to perfect their technique and race strategy. Goal is to compete at the National level.

Monthly Dues:

Payable upon receipt of monthly invoice at the beginning of each month – or when the swimmer starts. (Electronic payment is required). **Monthly dues are set, whether the swimmer swims one day or all days within any given month. There is no pro-rating of dues** (except when swimmer first starts). For swimmers who have mandatory sports practices with their schools (not for vacations, time off, sickness <30 days, etc.) and are unable to attend Splash practices, there is a **Maintenance Fee Schedule of 50% of your monthly dues as determined by your group.** During this time, swimmers may not practice at all with the club, but may enter meets and will be responsible for all incurred meet fees. Written notice (to your coach, the head coach, and the club treasurer) by the 10th of the month prior to the break is required explaining the swimmer's circumstances and the month(s) they will be off (email is acceptable). Other exceptions for not being able to swim will be reviewed on a case-by-case basis by the Club Board and Head Coach upon receipt of written documentation. Approval to waive monthly dues for an extended break may be granted if warranted.

Monthly Dues (continued)

Notification of complete separation must be received in writing no later than the 10th of the prior month.

Mandatory Club Registration Fee: \$75.00

This fee is for new swimmers as well as returning swimmers who have quit for an extended period and were not on the Maintenance Fee Schedule. Includes one silicone cap.

Fees listed above will be billed to you electronically.

Mandatory USA Swimming & Local Swim Committee (LSC) Athlete Registration

Once registered with Splash, the registrar will provide information for you to create a USA Swimming account. **This yearly registration is required for all club swimmers.** This allows for practice with a USA Swimming approved Club to enter all USA Swimming sanctioned meets and to qualify for Hawaii LSC travel subsidies, when applicable. Failure to complete this registration will result in your swimmer being unable to practice with the club.

Late Fee: A late fee of \$5.00 will be assessed in your following months bill if payment has not been received by the 10th of the month.

Swimmer's Name (Last, First, MI)

ACKNOWLEDGEMENT OF CLUB INFORMATION & RULES (continued)

Application to transfer & fee:

(From another LSC Club): \$5.00 (local, between Hawaii clubs) or \$10.00 (from out-of-state clubs) This fee along with a signed transfer form is required and only applies to swimmers currently registered with USA Swimming.

Meet Entry Fees:

Variable (will be billed on the monthly invoice the month following the meet) – Because Splash Aquatics is a competitive swim club, swimmers will be encouraged by their coaches to enter all eligible meets when they are ready. Swimmers are responsible to pay for all entry fees. The Club will pay all entry fees upfront to the host club, and swimmer will be billed for their portion on their monthly invoice the month following the meet. Swimmers will be notified by their coaches if they will be entered. It is the swimmer's and the parents of the swimmer's responsibility to let their Coach and Splash Aquatics Meet Entry person know both verbally and via a note or email if they will not be swimming. The meet notices and eligibility will be sent via e-mail as well as posted on the Splash website to inform you of meet dates. A draft entry list for verification by all swimmers will be emailed prior to submission of final entries to the host team. **Once final entries are submitted to the host team and your swimmer is entered, and there was no notice of intent NOT to swim, you will still be responsible for the meet fees even if your swimmer does not swim. Meet fees are not refundable from the host team.**

Other cost that may occur:

Extra pool time fees for Special practices and Off-Island Travel Expenses for Coaches. Coaches may opt for extra pool time outside of regular practice times for special or additional training for high-level meets. Participating swimmers may be asked to help pay for any pool fees associated with these extra practices. In addition, some meets that the club participates in are off-island. These may include State Championships (which alternate between Oahu and different outer islands) or other off island meets (i.e. Sakamoto Invitational on Maui, Sparky Kawamoto BC Meet on the Big Island, or Sectional/National meets on the mainland). For these meets, participating swimmers may be asked to split the costs for the expenses of the Coaches who attend (this can include but is not limited to, airfare, car rental, hotel accommodations and a small per diem of meals). This is in lieu of charging each club member a mandatory monthly "Travel Expense Fee".

Parent Obligations: Mandatory for Splash Parents

For each meet the club attends, volunteers are required as lane timers, meet marshals, concessions as well as for **team tents** to transport them to/from the meet venue and set them up/break them down. Also, Splash Aquatics hosts at least one (1) meet a year.

***** When our club hosts a meet, all parents are expected to help with manpower and planning.**

If you have any questions, please contact:

info@splashaquatics.org or via our "Contact Us" link on the Splash Aquatics website, splashaquatics.org

Tryout Coach Signature: _____		
Developmental I	Developmental II	Age Group
Juniors	Seniors	

I have read, understand, and accept the rules as stated: (both Parent's/Guardian's signature required)

Swimmer's Name (Last, First, MI)

Date

Signature of Mother / Legal Guardian

Signature of Father / Legal Guardian

Print Name of Mother / Legal Guardian

Print Name of Father / Legal Guardian

MEDICAL INFORMATION AND CONSENT

I/We, the undersigned parents(s)/legal guardian(s) of

(swimmer's name)

hereby give my consent to the rendering of emergency first aid and other medical procedures which at the time of injury or illness seems reasonably

advisable. I/We further understand that I/we will be responsible for payment of any such medical procedures. I/We impose no specific limitations or prohibitions regarding treatment other than those that follow (if not limitations, write "NONE" in the space below)

My Child has a medical condition: ☐ no ☐ yes** (if yes, specify & list medications).

** Swimmer must have their required medication, applicators, or appropriate medical equipment with them at all times.**Allergy Information:**☐ Yes ☐ No If yes, please list:

Foods: _____

Medications _____

Others _____**Emergency Information:**Mother/
Legal Guardian: _____ Day Phone: _____ Cell # _____Father/
Legal Guardian: _____ Day Phone: _____ Cell # _____**Insurance Information:**My child has health insurance: ☐ no ☐ yes (if yes, complete information below)

Insurance Carrier _____

Name of Policy Holder: _____ Policy No: _____

Name of Family Physician: _____ Office Phone: _____

Signature of Mother / Legal Guardian

Signature of Father / Legal Guardian

Print Name of Mother / Legal Guardian

Print Name of Father / Legal Guardian

Date Signed

Date Signed*(Both parent's signature required)*



Waiver/Release of Liability

PLEASE READ CAREFULLY BEFORE SIGNING.

THIS IS A RELEASE OF LIABILITY & WAIVER OF CERTAIN LEGAL RIGHTS

I/We, the undersigned parent(s)/guardian(s) of the participant(s) listed below, agree, and understand that swimming is a hazardous activity. I/we recognize that there are risks inherent in the sport of swimming, including but not limited to paralyzing injuries and death.

The participant(s) hereby agrees to participate in the swim team known as Splash Aquatics, Inc. ("Splash") which is a registered tradename of Splash Aquatics, Inc. a non-profit corporation ("SPLASH, INC.") registered in the State of Hawaii. The participant(s) and the parent(s)/legal guardian(s) hereby agree to indemnify and hold harmless SPLASH, SPLASH, INC., and their coaches, officers, directors, agents, and employees ("Released Parties") against any liability resulting from any injury that may occur

to the participant(s) while participating with SPLASH. The participant(s) also agree to indemnify and hold harmless SPLASH, SPLASH, INC. and their coaches, officers, directors, agents, and employees for any damages incurred arising from any claims, demands, action, or cause of action by the participant(s).

In addition to the above, I/we understand that photos and video are occasionally taken for promotional and marketing purposes at SPLASH practices and events and/or at swim meets where SPLASH competes. I/we agree that any photo or video taken of my child(ren) by SPLASH, SPLASH INC., and their coaches, officers, directors, agents, and employees, may be used in SPLASH or SPLASH INC's promotional and marketing materials, including its website.

I HAVE CAREFULLY READ THIS DOCUMENT AND SIGNED IT WITH FULL KNOWLEDGE OF ITS CONTENTS AND SIGNIFICANCE

Participant's Name (please print) _____

Birth date _____ Gender: ☐ Male or ☐ Female

Participant's Name (please print) _____

Birth date _____ Gender: ☐ Male or ☐ Female

Participant's Name (please print) _____

Birth date _____ Gender: ☐ Male or ☐ Female

Participant's Name (please print) _____

Birth date _____ Gender: ☐ Male or ☐ Female

Signature of Mother / Legal Guardian

Signature of Father / Legal Guardian

Print Name of Mother / Legal Guardian

Print Name of Father / Legal Guardian

Date Signed _____

Date Signed _____

(Both parents signatures required)