



Welcome,

The following pages contain the documents needed to join the SV5B Swim Team. The first document is the USA Swimming Registration sheet. There are two copies on the page, but only one is needed for each child. You will NEED to include a copy of your child's birth certificate. The second sheet is the SV5B Code of Conduct. This form requires both a child and parent signature. Both of these forms and the birth certificate copy need to be returned to

Lisa McGinnis
PO Box 3715
Hailey, ID 83333

The final form is the YMCA Membership Application. This must be filled out and returned directly to the YMCA.

If you have questions please contact Lisa McGinnis at McGinnis@SunValley1.com.



USA SWIMMING

2009 ATHLETE REGISTRATION APPLICATION

LSC: Snake River (SR) Swimming

REG. DATE / OFFICE USE ONLY

REGISTRATION DATE grid

ALL NEW REGISTRATIONS MUST INCLUDE A COPY OF THE ATHLETE'S BIRTH CERTIFICATE

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.

U.S. CITIZEN? YES NO

ARE YOU A MEMBER OF ANOTHER FINA FEDERATION? YES NO

IF YES, WHICH FEDERATION:

- 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 mental retardation, 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:

MAKE CHECK PAYABLE TO: SNAKE RIVER SWIMMING

MAIL APPLICATION & PAYMENT TO:

Dina L. Luptak, 2125 Darah Street, Idaho Falls ID 83402, luptak@cableone.net, 208/525-2047

REGISTRATION FEE table: USA Swimming Fee \$45.00, LSC Fee 7.00, TOTAL DUE \$52.00

YEAR LAST REGISTERED: IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2008, ENTER THAT CLUB CODE: LSC CODE: AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB:

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 USA SWIMMING'S COMMUNITY INITIATIVES

SV5B SWIMMING, INC.
CODE OF CONDUCT FOR SWIMMER

As a representative of SV5B Swimming, Inc., all team members shall abide by the following Code of Conduct.

The following code is in effect throughout the year. Some of the items refer specifically to team travel. Additionally, anyone who, in the opinion of the coach or coaches, acts in the manner that would interfere with the travel objectives listed below, will be subject to immediate return home (at the expense of the parent and/or swimmer) and other punishments including barring from future travel meets or other competition or dismissal from the team.

SV5B Swimming, Inc., will seek out of town swimming competition for the following reasons:

- 1) Different individual competitions;
- 2) A higher quality of competition;
- 3) Experience in trials/finals competitions;
- 4) Conditions conducive to exceptional performance
 - a. All swimmers will conduct themselves with an attitude of good sportsmanship both on and off the deck. Rude behavior and abusive language is unacceptable.
 - b. All swimmers will be responsible for competing in all events entered, unless prohibited by circumstances beyond their control, and excused by the coach.
 - c. The coaching staff holds the final word on any rules, regulations, or disciplinary action.
 - d. The consumption or purchase of alcohol, smoking or chewing tobacco, or use of any illegal drug or substance of any kind will not be allowed. In addition, any team member found or suspected to be in the presence of other (regardless of team affiliation) partaking in any of the above activities will be subject to the same punishment and probable expulsion from SV5B Swimming, Inc. Any swimmer suspected of such activity will appear before review committee.
 - e. Team meetings are mandatory. Be punctual to all meetings and warm-up times.

I recognize my responsibility to abide by the rules and requirements of SV5B Swimming, Inc. I am representing and I acknowledge that I have received and read such.

Swimmer	Date
Parent	Date

WOOD RIVER COMMUNITY YMCA MEMBERSHIP APPLICATION



Type of Membership*

- | | | |
|---|---|--|
| <input type="checkbox"/> Adult (19-29).....\$40 | <input type="checkbox"/> Dual Adults (19-29)...\$60 | <input type="checkbox"/> Youth (0-18)....\$20 |
| <input type="checkbox"/> Adult (30-69).....\$60 | <input type="checkbox"/> Dual Adults (30-69)...\$90 | <input type="checkbox"/> Property.....\$1,500 |
| <input type="checkbox"/> Adult (70+).....\$55 | <input type="checkbox"/> Dual Adults (70+).....\$85 | <input type="checkbox"/> Household.....\$2,000 |
| <input type="checkbox"/> Single Adult Family...\$80 | <input type="checkbox"/> Family.....\$110 | <input type="checkbox"/> Seasonal..... <i>Please inquire</i> |
| | | <input type="checkbox"/> Richard Odom Yoga Pass
\$20/person/month |

- Please check here if you would like to qualify for "Open Doors" Income-based Sliding Fee Scale rates.
- I would like to contribute \$_____ per month to support program and membership scholarship programs.

* Prices are per month and subject to change. Prices do not include state and local sales tax.

Primary Adult (required for youth under 18)

_____		_____		_____	
First Name		Middle Name		Last Name	
_____		_____		_____	
Gender		Date of Birth			
_____		_____		_____	
Mailing Address		City		State Zip	
_____		_____		_____	
Home Phone		Cell Phone		Out of Area Phone (if applicable)	
_____		_____		_____	
E-mail Address					

Primary language		Race		Marital status	
_____		_____		_____	

Additional Family Members

_____	_____	_____	_____	_____
Name (First, Middle, Last)	Age	Date of Birth	Gender	Relationship to Member
_____	_____	_____	_____	_____
Name (First, Middle, Last)	Age	Date of Birth	Gender	Relationship to Member
_____	_____	_____	_____	_____
Name (First, Middle, Last)	Age	Date of Birth	Gender	Relationship to Member
_____	_____	_____	_____	_____
Name (First, Middle, Last)	Age	Date of Birth	Gender	Relationship to Member
_____	_____	_____	_____	_____
Name (First, Middle, Last)	Age	Date of Birth	Gender	Relationship to Member
_____	_____	_____	_____	_____
Name (First, Middle, Last)	Age	Date of Birth	Gender	Relationship to Member
_____	_____	_____	_____	_____

Emergency Contacts

_____	_____	_____
Name	Phone	Relationship to Member
_____	_____	_____
Name	Phone	Relationship to Member

- I would like to help the YMCA better its mission by:
- _____ Volunteering at the YMCA
- _____ Donating to the YMCA

A staff member from the YMCA will contact you.

WOOD RIVER COMMUNITY YMCA MEMBERSHIP APPLICATION

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Payment Method

- Authorized monthly draft from a checking or savings account
 Authorized monthly draft from a credit/debit card (Visa, MasterCard, or American Express)
 Annual pay in full (cash, check, or credit/debit card)
 Other: _____

Bank Draft Payment

From Checking Account Savings Account
Bank transit/routing number (first 9 digits on account): _____
Account number: _____
Name as it appears on account: _____
Financial institution: _____
Please attach a voided check.

Credit/Debit Card Payment

Charge my Visa MasterCard American Express
Card number: _____
Expiration Date: _____
Name as it appears on credit card: _____
Financial institution: _____

Payment Authorization

I authorize my financial institution to honor drafts drawn by the Wood River Community YMCA on my account. Drafts from my account will be taken out between the 5th and 10th of each month. The amount drafted will be the current balance due on my account. It is understood that my bank draft will be continuous until 14 days after written notification has been received by the YMCA. Should any draft not be honored by my financial institution, I understand that it is still my responsibility to make payments for all fees due, including any fees not covered by the bank. The YMCA has the right to redraft any account that had non-sufficient funds. For drafting from a checking account, a voided check must be attached to this form. If at any time there is to be a deletion or cancellation of my membership, it is to be submitted in writing to the YMCA where my membership was purchased 15 days prior to the day the draft is to be charged to my account. Failure to do so will make the subsequent draft non-refundable. Changes or cancellations cannot be made by telephone or online. The YMCA will notify me, in advance, of any increase in my monthly membership draft amount.

Primary Adult Signature _____ Date _____

Mandatory Risk Waiver and Membership Understanding

The Wood River Community YMCA provides many recreational and other activities to the public. YMCA participants understand that these activities do involve inherent risks which are beyond the control of the Wood River Community YMCA and their staff, volunteers and members. We, the undersigned, do understand that upon using the facility and/or services that we hereby assume all risks for the behavior, actions, and safety of myself, my minor child or children while involved in the activities. Therefore, I assume full responsibility for personal injury to myself and/or to members of my family, or for loss or damage to my personal property and expenses thereof as a result of my negligence or the negligence of my family participating in said activities. I have read and understand this agreement and release of liability, and do voluntarily agree to sign. I also understand that I can be denied access to the YMCA if my account is not current. I understand that to enter the YMCA on each visit, I will need to provide the proper identification. I also give the YMCA permission to utilize pictures of me and/or my family in YMCA marketing, promotions, and print media.

Primary Adult Name _____ Signature _____ Date _____

Second Adult Name _____ Signature _____ Date _____

Name(s) of minor child(ren) I am responsible for: _____

WOOD RIVER COMMUNITY YMCA MEMBERSHIP APPLICATION

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Primary Adult Employer Information

Company name

Mailing address

City State Zip

Position/Occupation

Business phone Fax E-mail

Second Adult Employer Information

Company name

Mailing address

City State Zip

Position/Occupation

Business phone Fax E-mail

Providing the following information can assist the YMCA in meeting grant reporting guidelines. In addition, it helps us to identify how new members heard about the YMCA and why they decided to join. Thank you!

How did you first hear about the YMCA?

- Banner
- Direct mail
- Drive by
- Employer
- Internet/website
- Medical referral
- Newspaper
- Phone book
- Place of employment
- Radio
- School
- Television
- Y member
- No response

What interests helped you make the decision to join the YMCA?

- Active Older Adult programs
- Child care
- Family programs
- Get Fit/Stay Fit
- Group exercise/aerobics
- Losing weight
- Nutrition programs
- Personal training
- Physical therapy
- Strength training
- Swimming lessons
- Water exercise programs
- Youth programs
- Other: _____

What is your annual gross household income?

- | | |
|--|--|
| <input type="checkbox"/> \$0 - \$5,000 | <input type="checkbox"/> \$45,001 - \$50,000 |
| <input type="checkbox"/> \$5,001 - \$10,000 | <input type="checkbox"/> \$50,001 - \$55,000 |
| <input type="checkbox"/> \$10,001 - \$15,000 | <input type="checkbox"/> \$55,001 - \$60,000 |
| <input type="checkbox"/> \$15,001 - \$20,000 | <input type="checkbox"/> \$60,001 - \$65,000 |
| <input type="checkbox"/> \$20,001 - \$25,000 | <input type="checkbox"/> \$65,001 - \$70,000 |
| <input type="checkbox"/> \$25,001 - \$30,000 | <input type="checkbox"/> \$70,001 - \$75,000 |
| <input type="checkbox"/> \$30,001 - \$35,000 | <input type="checkbox"/> \$75,001 - \$80,000 |
| <input type="checkbox"/> \$35,001 - \$40,000 | <input type="checkbox"/> \$80,001 - \$85,000 |
| <input type="checkbox"/> \$40,001 - \$45,000 | <input type="checkbox"/> \$85,000 + |

I/We declare that this income information reported on this form, to the best of my/our knowledge is true, correct and complete. I/We attest that my/our request for Open Doors pricing is needs-based.

Signature _____

Date _____

WOOD RIVER COMMUNITY YMCA MEMBERSHIP APPLICATION

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Code of Conduct for YMCA Members

Using the mission and principles of character development as a guide, the following Code of Conduct is to ensure that all who enter our facility enjoy a safe, welcoming and comfortable environment.

Individuals are expected to act in a manner that upholds these principles at all times when in our facility or participating in YMCA programs. We expect those using the YMCA to behave in a way that shows respect and caring for others of all ages, including YMCA employees, which includes not using any language or engaging in any action that can hurt or frighten another person or that falls below a generally accepted standard of conduct. Specifically, when at the YMCA or participating in a YMCA program, action that does not show respect for others and is not permitted includes:

- Wearing inappropriate attire. Attire must be appropriate, including swimsuits only in the pool area and shoes, shorts and shirt or leotard in other areas of the facility. Clothing with vulgar or profane writing or pictures is not allowed.
- Using angry or vulgar language (includes swearing, name calling or shouting).
- Making physical contact with another person in any angry or threatening manner.
- Engaging in inappropriate behavior, sexual or otherwise.
- Harassing or intimidating by words, gestures, body language or any other menacing behavior.
- Stealing or other behavior that results in the destruction or loss of property.
- Carrying or concealing any weapons, devices or objects that may be used as weapons.
- Using or possessing illegal drugs or alcohol on YMCA property, in YMCA vehicles or a YMCA sponsored programs.
- Loitering.
- Any other conduct of an inappropriate, threatening or offensive nature.

Members and guests are encouraged to be responsible for their personal comfort and safety and ask any person whose behavior threatened their comfort to refrain from doing so. If a member or guest feels uncomfortable confronting the person directly, they should report the behavior to staff when asked.

Management staff will investigate all reported incidents. Suspension or termination of YMCA membership privileges may result from a determination by the YMCA that a violation of the Code of Conduct has occurred. The YMCA reserves the right to refuse service to anyone who does not adhere to the values and mission of the YMCA.

Primary Adult Signature _____ Date _____

Name(s) of minor children I am responsible for: _____

For Office Use Only

Date of application: _____

Staff signature: _____

Staff who set up account: _____

Prorated dues..... \$ _____

Other..... \$ _____

Subtotal..... \$ _____

Sales tax..... \$ _____

TOTAL PAID AT APPLICATION \$ _____

WOOD RIVER COMMUNITY YMCA MEMBERSHIP APPLICATION

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Be a Charter Member of the YMCA

Charter Memberships are available for the YMCA— by joining now, you will be recognized on the Donor Wall in the YMCA as a Charter Member, and know that you will not have to stand in line on your first day. Charter Memberships are available in four unique levels. Level I is the standard fee structure and can be paid in full for the first year, or on monthly auto-pay basis. Levels II, III and IV offer the opportunity to make an extra tax-deductible contribution for the capital campaign to build the YMCA.

The YMCA will abide by the “Open Doors” policy for Charter Memberships to ensure that the YMCA is open and available to all. Additionally, there are no joiner’s fees. For more information, please contact the YMCA at 208-727-YMCA.

	Level 1	Level 2	Level 3	Level 4
Rate(s)	Youth - \$240/year Young Adult - \$480 Adult - \$720 Adult Sr. - \$660 Dual - \$1,080 Dual Sr. - \$1,020 Family - \$1,320 Open Doors membership pricing may apply Available for sale through 12/31/07	\$2,000 (\$587.60 is a tax deductible campaign contribution) Available for sale through 5/31/08	\$5,000 (\$3,587.60 is a tax deductible campaign contribution) Available for sale through 5/31/08	\$10,000 (\$8,587.60 is a tax deductible campaign contribution) Available for sale through 5/31/08
“Extras”	<ul style="list-style-type: none"> • Charter Member denoted on membership card • Name on Recognition Wall • Two T-shirts 	<ul style="list-style-type: none"> • Charter Member denoted on membership card • Name on Recognition Wall • Two T-shirts • Gym bag 	<ul style="list-style-type: none"> • Charter Member denoted on membership card • Name on Recognition Wall • Two T-shirts • Gym Bag • Two Fleece Vests 	<ul style="list-style-type: none"> • Charter Member denoted on membership card • Name on Recognition Wall • Two T-shirts • Gym Bag • Two Fleece Vests • Special Charter Membership party