



BUTLER YMCA SWIM TEAM REGISTRATION

A YMCA membership is a requirement for participation during the Butler YMCA Pre-Season Swim and Swim Team season. Butler YMCA membership fees are as follows:

\$16.00	monthly withdrawal for Youth membership – no initial payment
\$70.00	monthly withdrawal for Family membership in addition to a Development Fee payment of \$150 (payable over 3 months)

2017 YMCA Program fees for the Butler Barracuda Swim Team members:

Swim Team season begins September 5, 2017 for Red, Black and Orange groups

**Swim Team season begins October 2, 2017 for Blue and Yellow group

Financial Assistance discounts and YMCA employee discounts do NOT apply to Swim Team.

You must be registered *BEFORE* attending practice!

If you have a question about which group you should register your child, please refer to the practice group guidelines on our team website.

Red (13 & over advanced):	\$335.00 (6 days/week 2-hour swim practice + morning practice)
Black (9 & over advanced):	\$285.00 (5-6 days/week 2-hour swim practice)
Orange (9 & over):	\$225.00 (4-5 days/week 1.5-hour swim practice)
Blue/Yellow (8 & under):	\$185.00 (3-4 days/week 1-hour swim practice)
High School:	\$115.00 for High School Swimmers who are on a High School Team

(1 and 2 hour practice times are approximate and will vary depending upon pool availability and practice group assignment)

OPTION: Additional program fee for USA Swimming. This program fee DOES NOT include the USA swimming annual registration fee.

\$100.00 for USA Swimming program (must be a YMCA member and a Swim Team member) – register online

Payment Options: Payment in full by check or credit card

For Program Fee: Monthly bank draft on 1st of each month with full payment for program fee due by December 1, 2017. Register in person at the Butler YMCA

Refund Policy: Membership dues are non-refundable. Refunds for programs will not be given after the first program date. A refund minus a \$5.00 processing fee will be issued if written notification is received PRIOR to the first program meeting.

Name of Swimmer (middle name must be included for USA Swimming)	M / F	DOB	Age as of 12/1/17	Red Black Orange Blue/Yellow	New Swimmer?	High School Swimmer	USA Swimming Option
					Y	Y	Y
					Y	Y	Y
					Y	Y	Y
					Y	Y	Y
					Y	Y	Y

NAME OF PARENT(S): _____

EMAIL: _____ (**MUST HAVE an email address as practice changes are notified through email)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER: _____

**** Please keep Page 2 for important Team Unify instructions ****



BUTLER YMCA SWIM TEAM

TEAM UNIFY INSTRUCTIONS

<http://www.teamunify.com/Home.jsp?team=ambyac>

The following must be completed on TEAM UNIFY BEFORE your swimmer attends their first practice. Specific instructions on how to complete the following will be posted on the Team Unify website and emailed to swim team families.

RETURNING SWIM FAMILIES:

Logon to your Team Unify account (there is a link to our Team Unify website from the swim team page of the Butler YMCA website).

<http://butler.bcfymca.org/Butler YMCA/Programs/Youth>

You must update the Emergency Contact/Insurance Information.

NEW FAMILIES TO OUR TEAM:

After you register for this program at the Butler YMCA, our team Secretary will create a Team Unify account for you and email your verification instructions for this account. You will receive this email within one week of registering. If you do not receive this email, please contact Nelson Ng at gednevrob@yahoo.com

Once you have verified your account, you will need to complete the same information as the returning families above and we ask that you do this promptly.

ALL FAMILIES ON OUR TEAM:

You will need to read the current season parent handbook, mandatory obligations and code of conduct, which can all be found under the documents tab on the Team Unify website. You will then need to print the Release Form (also found under the documents tab on the Team Unify website) signifying acceptance of the above listed forms. This Release form must be turned in **before** your swimmer can get into the water.



YMCA SWIM TEAM – EMERGENCY CONTACT FORM

Please complete a separate form for each swimmer.

Child's Name: _____ Birthdate: _____

Mother's Name/Legal Guardian: _____

Home Phone # _____ Business Phone # _____ Cell Phone # _____

Father's Name/Legal Guardian: _____

Home Phone # _____ Business Phone # _____ Cell Phone # _____

Emergency Contact Person(s)

(1) Name: _____ Phone # when child is in care: _____

(2) Name: _____ Phone # when child is in care: _____

Name of Child's Physician/Medical Care Provider: _____

Address: _____ Phone #: _____

Health Insurance Coverage for child: _____

Policy Number: _____

Special Disabilities (if any): _____

Allergies (including medication reaction) _____

Medical or Dietary information necessary in an emergency situation: _____

Medication, special conditions: _____

Additional information on special needs of child: _____

Signature of Parent/Guardian

Date