



Rocket Swim Club  
[www.rocketswim.com](http://www.rocketswim.com)  
Phone: +1-647-909-0659  
[rocketswim@gmail.com](mailto:rocketswim@gmail.com)

### Season (2018/2019) Registration Form

First and Last Name: \_\_\_\_\_

Birth Date (Year / Month / Day): \_\_\_\_\_ Gender:  Male  Female

Phone: \_\_\_\_\_

Parent/Guardian Name (1): \_\_\_\_\_ Relationship:  Mother  Father  \_\_\_\_\_

Home Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Main Phone: \_\_\_\_\_ Alternative Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

Parent/Guardian Name (2): \_\_\_\_\_ Relationship:  Mother  Father  \_\_\_\_\_

Home Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Main Phone: \_\_\_\_\_ Alternative Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

### Club Terms and Conditions:

- **Payment Policy:**
  - Payment should be provided by postdated cheque based on schedule predefined on RocketSwim website or agreed upon with RocketSwim management. **All postdated cheques should be provided in the beginning of season.**
  - Please make your payments by cheque(s) are payable to Rocket Swim Club”  
(for more information with regards to swimming fees please visit club Web Site: [www.rocketswim.com](http://www.rocketswim.com))
  - Any cheque returned due to non-sufficient funds is subject to 25.00 CAD bank administrative charge and must be replaced within one week.
  - **Discontinuation of membership** - 30 days written notice must be provided to the Head Coach in order to receive any refund for swimmers no longer wishing to swim with the club. There will be no reimbursement or refund of fees paid or owed for discontinuation of membership after February 15th of the swimming season.
- Swim club fees assumes breaks in workout schedules due to statutory holidays, school breaks and similar circumstances. Swim practice(s) can be also canceled because of number of circumstances which can prevent club from being work efficiently and safely. Such circumstances include (but not limited to) facility problems, Coach or lifeguard illnesses, weather conditions, etc. Fees for such practices will not be reimbursed.
- To complete the registration family must sign and submit Medical Release Waiver, Waiver of Liability, Photograph Release and Personal Information Protection & Electronic Documents Act forms.

I have read and understand the above and acknowledge my consent of the above terms and conditions.

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



## Medical Consent Authorization

First and Last Name: \_\_\_\_\_

Birth Date (Year / Month / Day): \_\_\_\_\_ Gender:  Male  Female

Phone: \_\_\_\_\_

### Medical Provider Information:

OHIP number: \_\_\_\_\_

Physician: \_\_\_\_\_ Physician's Phone: \_\_\_\_\_

Physician's Address: \_\_\_\_\_

### Emergency Contacts:

Name	Phone	Relationship
_____	_____	_____
_____	_____	_____

### Known Medical Problems and Medications:

*This information is included to provide information to emergency personnel of medical problems and medications in an emergency situation.*

Existing Medical Problem Frequency <i>(Example: Asthma)</i>	Medication Taken <i>(Example: Combivent)</i>	Dosage Taken <i>(Example: 2 puffs)</i>	Dosage <i>(Example: "Twice Daily")</i>
_____	_____	_____	_____
_____	_____	_____	_____

### Medical Consent Authorization:

In the event of an injury, accident, illness or other emergency, and if the above stated physician and emergency contact cannot be reached, I hereby give my permission for any supervisor, coach or other team administrator associated with the Rocket Swim Club to seek and give medical treatment for our child(ren) in the event of accident, injury, illness. I also authorize my child to be treated by certified emergency personnel such as emergency medical technicians, emergency room physicians and other emergency room personnel such as nurses and laboratory technicians. I agree to accept financial responsibility for the costs related to this medical treatment.

I hereby waive, release and forever discharge **Rocket Swim Club** and associated supervisor, coach, or other team administrator from all rights and claims and damages, injury, loss to person or property which may be sustained or occur.

I hereby acknowledge that my child(ren) is (are) physically fit and capable of participation in all swim team activities.

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



## WAIVER OF LIABILITY

This Agreement waives the liability of “**RocketSwim Club**” for any use of the services and facilities at the Swim Club, included but not limited to the swimming pool, playground, basketball courts, volleyball courts, tennis courts and grounds.

**A NON-PARENT CANNOT LEGALLY SIGN THIS WAIVER FOR OTHER PEOPLE’S CHILDREN. IT MUST BE SIGNED BY A PARENT/LEGAL GUARDIAN.**

PLEASE READ CAREFULLY AND SIGN BELOW.

1. I, the applicant signing below wish either for myself or my child \_\_\_\_\_ (print name) to utilize the services and facilities associated with **Rocket Swim Club**, included but not limited to the swimming pool, playground, basketball courts, volleyball courts, tennis courts, grounds and dressing rooms.

2. I hereby agree that the use of the services and facilities at the **Rocket Swim Club**, included but not limited to the swimming pool, playground, basketball courts, volleyball courts, tennis courts, grounds and dressing rooms is at my and my child’s own risk. As a condition of my and my child’s use of such services and facilities at the Swim Club, included but not limited to the swimming pool, playground, basketball courts, volleyball courts, tennis courts, grounds and dressing rooms, I, on behalf of myself, my heirs and assigns and on behalf of my child (and my child’s heirs and assigns) expressly agree to forever discharge, waive and release **Rocket Swim Club**, its directors, management, staff, servants, agents, employees and/or independent contractors and their heirs, successors and assigns from any and all claims, demands, injuries, liabilities, actions, causes of action and from all acts of active or passive negligence on the part of the **Rocket Swim Club** and its directors, management, staff, servants, agents, employees and/or independent contractors and their heirs, successors and assigns on account of any and all injuries or damages, including but not limited to bodily injury, mental injury and/or property damage from any event, mishap, accident, loss, damage or injury suffered by myself or my child resulting from or connected with or caused by the use of the services and facilities at the **Rocket Swim Club**, included but not limited to the swimming pool, playground, basketball courts, volleyball courts, tennis courts, grounds and dressing rooms. I further agree to defend, indemnify and hold harmless the **Rocket Swim Club** and its directors, management, staff, servants, agents, employees and/or independent contractors and their heirs, successors and assigns from any and all claims, losses and liabilities arising from, connected to, and/or arising from my and/or my child’s use of the services and facilities at the Swim Club, included but not limited to the swimming pool, playground, basketball courts, volleyball courts, tennis courts, grounds and dressing rooms.

3. I declare and affirm that I and my child is (or are) in good medical and physical condition, and use of the services and facilities at the **Rocket Swim Club** does not pose any danger to my or my child’s health. I further agree to abide by the rules and regulations of the **Rocket Swim Club**, as they now exist or may be amended in the discretion of the **Rocket Swim Club**.

**I have read and understand the above and foregoing and acknowledge my consent to terms of this Waiver and Release for myself and my child.**

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Child’s Printed Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Telephone Number: \_\_\_\_\_



## Personal Information Protection & Electronic Documents Act

REGISTRATION CONSENT FORM – FOR USE BY SWIMMERS AND OFFICIALS

**Club Name**                    “Rocket Swim Club”

**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 Federal 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. These purposes include national, provincial and event registration, insurance coverage, training and competition participation and competition result publication. Some of the information you provide will be passed on to Swimming/Natation Canada (SNC) and Swim Ontario, 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 the Swim Ontario at

<http://swimontario.com/userfiles/file/About%20Us/Policy%20and%20Procedure/SwimOntarioPolicies.pdf>

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



## PHOTOGRAPH PERMISSION

It is necessary for the Club to have your permission to take any photographs or video of your swimmer during club training sessions and at swim meets. These photographs/ videos will be used to promote the programs and services offered by ROCKETSWIM CLUB. Examples of potential use include: posted to ROCKETSWIM CLUB's website, newsletters or Annual General Meeting slide shows; and kept for publication in marketing print or videos. The swimmer and the swimmer's parent/ guardian reserve the right to request, in writing, the removal of any picture or video depicting their child. ROCKETSWIM CLUB will honor all such requests as quickly as possible.

I give permission for the parents, coaches, swimmers, local media and other assigned photographers to take photographs and video of my child(ren):

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during Club training sessions and at swim meets. These photographs/ videos may be used as stated above.

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**Parent/Guardian Name**

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**Parent/Guardian Signature**

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**Date**



## Swimmer Rules of Conduct

The swim team promotes the sport of competitive swimming within our community and develops in our swimmers the skills required for competitive swimming. Membership with the club also provides swimmers the opportunity to compete in various level meets ranging from the novice to the International level.

In order to accomplish our goals, we need to maintain a strong behavior and discipline code to support each athlete's efforts; and therefore the club has adopted a no tolerance program. This document lays out the expectations for all swimmers in the club.

While participating in any club activity, including practices, swim meets, social events, team travel, overnight stays in hotel, dining in restaurants, public transport, and when on public/private property, including change rooms, parking lots, etc., all swimmers are expected to demonstrate responsible behavior and manners as befits the standards of swim team. The following are examples of unacceptable behavior that will not be tolerated at any time.

- Damage to facilities
- Damage to personal property
- Use of inappropriate language
- Physical fighting
- Unsportsmanlike conduct
- Use of drugs, tobacco, or alcohol
- Inappropriate sexual gestures or contact
- Disrespectful or abusive comments or behavior
- Committing any act which would be considered an illegal offence
- Breaking training or curfew without previously authorized permission

When traveling with the club, or participating away meets or training, room doors will be left ajar when a non-occupant visits any room.

Coaches and chaperones have been given direction by the Management of swim team to act firmly and quickly should any unacceptable incidents occur. Actions may include:

- Being sent home from a swim meet at the member's expense
- Suspension from swimming
- Damage to property will be the responsibility of the instigator and his/her parents

\_\_\_\_\_  
**Parent/Guardian Name**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**