# **Okotoks Masters Swim Club (OMSC)**

2017-2018 Registration Form

Name:		
	(Surname, First Name, Middle	Initial)
Address:		
	(Street Address)	
	(City, Province, Postal Code)	
Phone:(Home)	(Work/Cell)	_
Email:		
	ntact the members with information)	)
**Date of Birth:(Day/Month/Year)	Sex: FM	
**Emergency Contact Person:		
Nam	et	<u>ohone number(s)</u>

#### Membership Information Pro-rated Oct-June (Check one only)

#### **Payment**

**Options** 

advise the coaching staff of these concerns.

Option	12					
	1	Mornings 2 days Please circle 1 option	A. Mon/Wed B. Wed/Fri C. Mon/Fri D. Tue/Thur	09:00-10:00 09:00-10:00 09:00-10:00 09:00-10:00	\$425 \$425 \$425 \$425	Make cheque payable to: Okotoks Masters Swim Club. (NO CASH PLEASE)
	2	Evenings 2 days Please circle 1 option	A. Mon/Wed B. Mon/Wed	20:30-21:30 20:30-22:00	\$425 \$530	Refunds/Cancellations: All registered members have a try-out period of 1 month, at this point, they can receive a full refund less \$75.00 administration fee, if they feel they no longer wish to continue.
	3	Mornings 3 days	M/W/F	09:00-10:00	\$530	
	4	Mornings 5 days	M/T/W/T/F	09:00-10:00	\$625	
	5	1 day/week Any 1 hour session but has to be same session every week	Please indicate your choice of day and time		\$280	After this point, you have committed to the remainder of the season and unless the circumstances are extenuating**NO REFUNDS will be
		Add Sundays to any package	Sunday Note: workout provided but no coach	07:00-08:30	\$70	given.  **Refunds subject to \$75 administration fee, effective the following month after notification.
The am/pm or	ption is no	o longer being offered, but those members who alread	ly use that option can be grandfar	thered, as long as they maintai	n it.	enective the following month after notification.
		FLEX PACKAGES				
	6	Flex Member You are available to swim any or all of the swim sessions.	M/W Eve M/Tu/W/Th/F Sun	20:30-22:00 09:00-10:00 07:00-08:30	\$715	
	7	Family Flex You can share with one (1) family member , You and your family member may swim any of the swim sessions throughout the week as long as you do not swim at the same time.	M/W Eve M/Tu/W/Th/F Sun	20:30-22:00 09:00-10:00 07:00-08:30	\$1055	

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Wai	Waiver:				
I,	, declare the	at:			
1. 2. 3.	<ul> <li>and the Okotoks Recreation Centre.</li> <li>I agree that OMSC and the Okotoks Recreation Centre shall n release OMSC including its members and Executive, and the Calaims with respect thereto.</li> <li>I hereby authorize OMSC and/Okotoks Recreation Centre to so</li> </ul>	ty loss resulting from any cause whatsoever in my activities with OMSC of be held liable for any such personal injury, death or property loss, and skotoks Recreation Centre and its employees and agents from any and all ecure such medical advice and services as may be deemed necessary for a responsibility for any and all such healthcare measures taken for my ess shared with other OMSC members.			
Print	nt Name Dat	ie – – – – – – – – – – – – – – – – – – –			
Signa	nature				

Please complete all 3 forms and either mail or drop them off with payment to:

Okotoks Masters Swim Club c/o Apreil Gray 25 Cimarron Estates Link Okotoks AB T1S 0C6

> We swim from Monday 18th September, 2017 until Friday 29th June, 2018 (inclusive) subject to change.

We take a holiday break from Monday 24th December until Friday 5<sup>th</sup> January inclusive We start again in the New Year on Sunday 7th January 2018

Due to stat holidays and special events at the pool, there will be no swimming on the following days:

Mon 9th Oct (Thanksgiving); Sun 26th November (FSSC hosted meet);
Sun 4<sup>th</sup> Feb (FSSC hosted swim meet); Mon 19th Feb (Family Day);
Fri 30<sup>th</sup> March to Mon 2nd April (inclusive) – Easter Weekend.
Swimming from April 3rd to April 6<sup>th</sup> (Easter/Spring Break) may be subject to reduced lanes and coach availability.
Mon May 21<sup>st</sup> (Victoria Day)

You will be notified via e-mail of any other changes or cancellations in swim days due to pool closures for other aquatic events.

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Club Name:

11759 Groat Road, Edmonton, AB, T5M 3K6 Phone 780, 415-1780 Fax 780, 415-1788 office@swimalberta.ca http://www.swimalberta.ca

## Protection of Personal Information Swim Alberta Consent Form

the consent section. guardian sign the consent form.					
Protection Act around the release of ed for collection and use of personal					
c registration, swimming activities, team ub/provincial records. All information standard operating procedures of the e used as per operations. Should a f and or publication of their name, age competitions and the association then on will be modified for publication. All					
on the release and publication of the the signed form in your records for a 1 ion B then a copy of the form must be					
vende man a skakt or					
vards presentation ia.					
Photos or videos that are used in electronic or print media.  Swimmers name, gender, age and/or classification and results or provincial team and youth recognition program that are used in the swimming newsletters and other communications, in print form, electronic or otherwise.					
assification in team lists or databases to ials or the Swim Alberta office.					
ion supplied by yourself in one of the					
of information (as outlined above).					
se of the information (as outlined					
on as defined in the Societies Act, quested a copy of the register of Alberta as part of the Societies Act nat indicate a YES must be returned					
No, I do not consent					