



FOR YOUTH DEVELOPMENT®
 FOR HEALTHY LIVING
 FOR SOCIAL RESPONSIBILITY

BSY SWIM TEAM SUMMER 2013 REGISTRATION

April 22, 2013 – August 8, 2013

PARENT 1 FULL NAME:	
PARENT 2 FULL NAME:	
STREET ADDRESS: (where swimmer lives)	
CITY/ZIP:	HOME PHONE:
CELL PHONE PARENT 1:	CELL PHONE PARENT 2:
E-MAIL PARENT 1:	E-MAIL PARENT 2:

SWIMMER'S FULL NAME	SEX	AGE	Date of Birth
	M F		
	M F		
	M F		
	M F		

The BSY Swim Team is a program for youth aged five to eighteen, who can swim one length of the pool on their stomach and back (generally corresponds to Minnow or Starfish YMCA progressive swim levels). The Bridgeport/Stratford YMCA (BSY) swim team practices at the Stratford YMCA Main Street facility. Practice schedules will be organized based on swim ability.

The BSY Mission

The Bridgeport/Stratford YMCA (BSY) swim team is a YMCA core values-based program promoting swimming skills, character development, sportsmanship, volunteerism, and leadership in an environment where everyone has equal access to pursue their goals regardless of race, creed, or economic status. It is our mission to actively recruit children of varied backgrounds and ethnicities to participate in a sport that has long suffered from a lack of diversity.

STRATFORD YMCA

3045 Main Street, Stratford CT 06614
 P 203 375 5844 W stratfordymca.org

BRIDGEPORT YMCA

850 Park Avenue, Bridgeport CT 06604
 P 203 334 5551 W bridgeportymca.org



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IN CASE OF EMERGENCY

EMERGENCY CONTACT (other than parent):	PHONE NUMBER:
PHYSICIAN:	PHONE NUMBER:
HOSPITAL PREFERENCE:	
IMPORTANT MEDICAL INFORMATION: (Allergies, etc.)	

MEMBERSHIP

Members of YMCA competitive teams must have full-privilege YMCA memberships. A swimmer must be a member in good standing of his/her YMCA for 30 days prior to competing for that YMCA in a meet. The swimmer must be a member in good standing of his/her YMCA for 90 days prior to representing that YMCA in a district, regional, state or national championship meet.

CODE OF CONDUCT

Together, we can all do more to help strengthen our community. Central Connecticut Coast YMCA members will consistently celebrate the YMCA core values of caring, honesty, respect, and responsibility with behavior that illustrates those values.

VOLUNTEER AGREEMENT

Each home meet calls for many volunteers to ensure that the meet runs smoothly. Each family member (age 16+) is required to serve as a volunteer for a minimum of 3 shifts during the season.

SUMMER 2013 SEASON: April 22, 2013 – August 8, 2013

The cost of the season is \$270 for Youth Advanced, \$240 for Silver, and \$185 for Bronze. A down payment of \$50 is due at time of registration for each swimmer. You may either pay in full for the season and receive a 10% discount, or elect to pay for the season in 2 partial installments which will require enrollment in autodraft.

FINANCIAL ASSISTANCE

Program financial assistance is available for qualified members through the Open Door program, funded by the Strong Kids Campaign. We are community based and believe that our programs should be available for everyone. This confidential scholarship assistance application is available at Member Services and on-line at <http://www.cccymca.org/>

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PROGRAM REFUND POLICY

If at any time you need to remove your swimmer from the team, please fill out the appropriate form at Member Services. Refunds for program fees will only be approved in the following instances:

1. The YMCA cancels a program.
2. Request form is received prior to the start of the session.
3. After the start of the session, only for medically documented reasons.

There will be a \$10.00 administrative fee for each refund or credit, unless the YMCA cancels the program.

DROP OFF/PICK UP

Please accompany your swimmer to the pool to ensure that they arrive on time and are prepared to practice. Make arrangements for pick-up at the end of your swimmer's scheduled practice.

COMMUNICATION

Subscribe to the BSY NewsFlash to receive important messages regarding meets, practices, team updates, and more. Go to the following website, scroll down to the bottom, click on "Subscribe to this NewsFlash" and follow the prompts: <http://worknotes.com/CT/Bridgeport/BSYSwimTeam/newsflash.aspx>

TEAM UNIFORM

The team suit is the TYR Durafast Alliance Splice in Royal/White. Boys wear the Male Splice Jammer and Girls wear the Female Splice Diamondback. Contact Debbie Cosme at Metro Swim Shop to order. The BSY swim caps are available to purchase at the Stratford Y branch.

USA SWIMMING

USA Swimming will be offered to all swimmers for the summer long course season. By registering for USA Swimmers will compete in more meets, and have more opportunities to improve on their times. For new USA swimmers the fee is \$100 (\$61 for membership) and for returning USA Swimmers it will be \$39 during registration. We will also ask for an additional \$39 from all USA swimmers mid-season to cover entry fees.

By signing below, I understand and agree to the above conditions:

Parent's Signature

Date

This registration form must be accompanied with a down payment of \$50 per swimmer.

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BSY SWIM TEAM

Summer 2013 Autodraft Form

The YMCA strives to meet the needs of all families. We understand that paying bills sometimes gets lost in the shuffle, so we're here to help you.

Your swim team payments will be processed on the due date. No more hassle of trying to find the time to get to the YMCA to drop off your payment.

If you have any questions, please call Deanna at 203-375-5844 and she will be happy to help you.

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I, _____, hereby authorize the Stratford YMCA to charge the account listed below in the amount of \$_____ on May 1, 2013 and June 1, 2013 for the BSY Swim Team. **I understand that I must notify the Stratford YMCA of any account changes, if my card is lost or stolen, and that I must provide two weeks' notice if I wish to discontinue this service. I also understand that if for any reason this account cannot be charged, I will be charged a \$20.00 returned payment fee.**

Name of Swimmer(s) _____

Name and address of account holder _____

Visa/MasterCard number _____
Expiration date ____ / ____

Checking account number (please include routing number):

Signature of account holder _____ Date _____

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PARENT COPY

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