
COMPETITIVE PROVINCIAL, NOVICE AND MINI 2018-2019 PROGRAM

Dear Parents & Swimmers,

Markham Synchro welcomes you to the Competitive Synchro Program 2018-2019 season!

We are confident this year will present new challenges, friendships and accomplishments. Building the skills of synchronized swimming is only one of our goals; we also endeavor to teach valuable life skills such as commitment, teamwork, dedication and co-operation. We measure success by improvement in all of these areas.

For insurance purposes, swimmers must have **all** forms completed, signed and returned to Markham Synchro representatives on registration days **prior** to the first time in the pool for try-outs in September. When completing registration forms, you will see **several signature requirements** to indicate your understanding of various permissions, waivers and commitments. Please ensure you sign in all required spaces. Questions prior to registration may be directed to mkscenquiry@gmail.com.

We are looking forward to another fantastic year!

Thank you,

Coaches and Executive
Markham Synchro Club

Registration Checklist – Ensure you return ALL of the following items:

- Markham Synchro Club (MKSC) Registration Form**
- SIGNED Agreement, Waiver, Consent and Commitment Forms:**
 1. Participant's Agreement For Minor Child (Liability Waiver) and Consent for Emergency Medical Treatment
 2. Social Media, Photograph and Information Permission & Electronic Communication Permission
 3. Commitment Form
- Photocopy and Original Birth Certificate (only required for new Competitive swimmers to MKSC)**
- \$100 Tryout Fee payable by cheque to Markham Synchro Club for Provincial Stream Only**
Note: There is no fee for Novice and Mini team placement sessions. The Provincial tryout fee can be applied to Novice team fees if the athlete swims with MKSC at this level.

Administration Policy:

To comply with local and Provincial insurance policies, forms are due by the swimmer's first tryout and prior to swimmer entering the pool. No exceptions.

Payment Policy:

To comply with local and Provincial insurance policies, the tryout fee is required for the swimmer's first tryout and prior to swimmer entering the pool. No exceptions. Remaining payments must then be paid based on the MKSC Fee Schedule. Note: There is a \$40 cash charge for any NSF cheques.

Refund Policy:

Markham Synchro Club is a not-for-profit organization with financial commitments to operating and contractual costs (coaches, pool contracts, etc). Club fees and Tryout fee are NON refundable.

MARKHAM SYNCHRO CLUB REGISTRATION PACKAGE

COMPETITIVE PROVINCIAL, NOVICE AND MINI 2018-2019 PROGRAM

REGISTRATION FORM

Please Print Clearly

Birth Cert?	Chq #
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Swimmer Name	Date of Birth - Month DD, YYYY <small>(Ex. JAN 1, 2000)</small>
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Previous Club	Last Registered Year:
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Coach Consideration for Provincial Extra Routine: SOLO DUET NONE

Parent / Guardian 1 Signature	
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MAIN CONTACT INFO		Parent / Guardian 1	Parent / Guardian 2
	Name		
	Mobile Number		
	eMail		
	Residence Info	STREET: CITY: PHONE:	POSTAL CODE:

SWIMMER INFO	Known Allergies		Gender	
	Medication(s)			
	Concussion History			
	Medical problems/ conditions			
	Family Doctor	NAME:	PHONE:	
	Anything else club / coaches should know			

IN THE EVENT OF AN EMERGENCY, CONTACT (DIFFERENT FROM PARENTS):

EMERGENCY CONTACT INFO	NAME:			
	RELATIONSHIP TO SWIMMER:			
	STREET:		POSTAL CODE:	eMail:
	CITY:			
	PHONE:		MOBILE:	

MARKHAM SYNCHRO CLUB REGISTRATION PACKAGE

COMPETITIVE PROVINCIAL, NOVICE AND MINI 2018-2019 PROGRAM PARTICIPANT'S AGREEMENT FOR MINOR CHILD TO BE SIGNED BY MINOR PARTICIPANT AND PARENT/GUARDIAN



PARTICIPANT NAME: _____ **AGE (UNDER 18)** _____ **CLUB:** MARKHAM SYNCHRO CLUB

ALL SPORTS, INCLUDING SYNCHRONIZED SWIMMING, HAS ITS RISKS

I PARTICIPATE IN THE SPORT OF SYNCHRONIZED SWIMMING BECAUSE IT IS PHYSICALLY AND MENTALLY CHALLENGING. IN CONSIDERATION OF MY PARTICIPATION IN SUCH PROGRAMS, ACTIVITIES AND EVENTS, I HEREBY ACKNOWLEDGE THAT I AM AWARE OF THE RISKS AND HAZARDS ASSOCIATED WITH OR RELATED TO SYNCHRONIZED SWIMMING. THE RISKS AND HAZARDS OF SYNCHRONIZED SWIMMING INCLUDE, BUT ARE NOT LIMITED TO:

- INJURIES FROM EXECUTING STRENUOUS AND DEMANDING PHYSICAL TECHNIQUES IN SYNCHRONIZED SWIMMING INCLUDING BOOSTS & LIFTS;
 - INJURIES FROM DRYLAND TRAINING INCLUDING WEIGHTS, PILATES, RUNNING, DANCE, BANDS, CIRCUS SCHOOL AND MASSAGE;
 - INJURIES FROM ENTERING THE WATER BY EITHER DIVING OR JUMPING;
 - INJURIES FROM SPENDING EXTENDED TIMES IN CHLORINATED WATER INCLUDING BACTERIAL INFECTIONS AND RASHES;
 - INJURIES FROM COLLISIONS WITH THE POOL WALL OR POOL BOTTOM;
 - INJURIES FROM EXTENDED TIME UNDERWATER;
 - INJURIES FROM PHYSICAL CONTACT WITH OTHER PARTICIPANTS INCLUDING SPOTTERS WHOSE ROLE IS TO ENHANCE SAFETY AND LEARNING;
 - INJURIES FROM STRENUOUS CARDIOVASCULAR WORKOUTS;
 - INJURIES FROM EXERTING AND STRETCHING VARIOUS MUSCLE GROUPS; AND
 - TRAVEL TO & FROM COMPETITIVE EVENTS & ASSOCIATED NON-COMPETITIVE EVENTS WHICH ARE AN INTEGRAL PART OF THE ORGANIZATION'S ACTIVITIES.
- FURTHERMORE, I AM AWARE:
- THAT INJURIES SUSTAINED IN SYNCHRONIZED SWIMMING CAN BE SEVERE;
 - THAT I MAY COME INTO CLOSE CONTACT WITH OTHER PARTICIPANTS, INCLUDING THE POSSIBILITY OF ACCIDENTAL AND UNEXPECTED TOUCHING;
 - THAT I MAY EXPERIENCE ANXIETY WHILE CHALLENGING MYSELF DURING THE ACTIVITIES;
 - THAT MY RISK OF INJURY IS REDUCED IF I FOLLOW ALL RULES ADOPTED DURING TRAINING; AND
 - THAT MY RISK OF INJURY INCREASES AS I BECOME FATIGUED.

SWIMMER: I AGREE TO BE RESPONSIBLE FOR MYSELF

I AM PARTICIPATING VOLUNTARILY IN THESE ACTIVITIES, EVENTS AND PROGRAMS. I AGREE THAT THERE ARE RISKS IN SYNCHRONIZED SWIMMING AS DESCRIBED ABOVE. BY PARTICIPATING VOLUNTARILY IN THESE EVENTS, ACTIVITIES AND PROGRAMS, I AM EXPOSED TO THESE RISKS AND HAZARDS. I AGREE TO ACCEPT THEM AND BE RESPONSIBLE FOR ANY INJURY OR OTHER LOSS WHICH I MIGHT RECEIVE WHILE PARTICIPATING IN THESE EVENTS ACTIVITIES AND PROGRAMS.

IF SOMETHING HAPPENS TO ME, I RELEASE THE ORGANIZERS OF RESPONSIBILITY FOR ANY CLAIMS, DEMANDS, ACTIONS AND COSTS WHICH MIGHT ARISE OUT OF MY PARTICIPATION. IN THIS AGREEMENT I UNDERSTAND "ORGANIZERS" TO MEAN: SYNCHRO SWIM ONTARIO, ITS DIRECTORS, OFFICERS, MEMBERS, EMPLOYEES, VOLUNTEERS, OFFICIALS, PARTICIPANTS, CLUBS, AGENTS, SPONSORS, OWNERS / OPERATORS OF THE FACILITY, AND REPRESENTATIVES.

I ACKNOWLEDGE MAKING THIS AGREEMENT

I HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS OF THIS AGREEMENT, AND BY SIGNING IT VOLUNTARILY, I AM AGREEING TO ABIDE BY THESE TERMS.

PRINTED NAME OF PARTICIPANT

SIGNATURE OF PARTICIPANT

DATE

PRINTED NAME OF PARENT OR GUARDIAN

SIGNATURE OF PARENT OR GUARDIAN

DATE

CONSENT FOR EMERGENCY MEDICAL TREATMENT

TO BE SIGNED BY THE PARENT/GUARDIAN OF A MINOR PARTICIPANT

I, _____, PARENT/LEGAL GUARDIAN OF _____,
GIVE PERMISSION TO THE OFFICIALS AND COACHES OF SYNCHRO SWIM ONTARIO TO MAKE DECISIONS CONCERNING MEDICAL CARE AND TREATMENT, AND WHERE NECESSARY TO AUTHORIZE SUCH CARE AND TREATMENT IN EMERGENCY SITUATIONS. I UNDERSTAND THAT THE OFFICIALS AND COACHES OF SYNCHRO SWIM ONTARIO WILL MAKE EVERY REASONABLE EFFORT, IN THE CIRCUMSTANCES, TO CONTACT ME REGARDING MY CHILD'S/WARD'S MEDICAL STATUS IN THE EVENT AN EMERGENCY ARISES. IN THE EVENT THAT I CANNOT BE REACHED IN AN EMERGENCY I HEREBY GIVE MY PERMISSION TO THE LICENSED PHYSICIAN, DENTIST, ATHLETIC THERAPIST, NURSE OR OTHER MEDICAL PROFESSIONAL WHOSE SERVICES MIGHT BE REQUIRED TO PROVIDE MEDICAL CARE AND TREATMENT.

BY SIGNING HERE, I INDICATE THAT I HAVE THE UNDERSTANDING AND CAPACITY TO COMMUNICATE HEALTH CARE DIRECTIVES FOR MY CHILD/WARD AND THAT I AM FULLY INFORMED AS TO THE CONTENTS OF THIS DOCUMENT AND UNDERSTAND THE FULL IMPORT OF THIS GRANT OF POWERS TO THE OFFICIALS AND COACHES OF SYNCHRO SWIM ONTARIO.

PRINTED NAME OF PARENT OR GUARDIAN

SIGNATURE OF PARENT OR GUARDIAN

DATE

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SOCIAL MEDIA, PHOTOGRAPH AND INFORMATION PERMISSION

The undersigned authorizes **Markham Synchro Club & Synchro Swim Ontario** to permit photographers / videographers employed or designated by **Markham Synchro Club & Synchro Swim Ontario** to take photographs, film and / or video footage of & obtain quotations / information from the undersigned.

Such photographs, film / video footage & recorded comments may be used for educational purposes, publications and / or broadcasts which may include (but are not limited to) the following: newspapers, radio, television, staff newsletters, photographic displays, and publicly distributed publications such as annual reports, external newsletters, news releases, pamphlets, brochures, websites, social media, flyers & promotional publications. The undersigned shall be entitled to no compensation as a result of such use from **Markham Synchro Club** or **Synchro Swim Ontario**. Please also refer to the MKSC Social Media Policy on www.markhamsynchro.com

Print Name of Swimmer: _____

Print Name of Parent / Guardian: _____

Signature of Parent / Guardian: _____ Date _____

AGREE TO RECEIVE ELECTRONIC COMMUNICATIONS

The undersigned agree to receive electronic communications from **Synchro Swim Ontario** and member clubs including **Markham Synchro Club**. Electronic communications include newsletters, promotions and program and event information that may contain information of a commercial nature. I understand that if I no longer wish to receive electronic communications from **Synchro Swim Ontario** or **Markham Synchro Club**, I can withdraw my consent at any time using the process set out in the **Synchro Swim Ontario** or **Markham Synchro Club** Privacy Policy.

Print Name of Swimmer: _____

Print Name of Parent / Guardian: _____

Signature of Parent / Guardian: _____ Date _____

Synchro Swim Ontario requests that each member sign a permission form to allow for electronic communication, and / or photos, and / or videos be used for a variety of purposes.

The form above includes permission for Synchro Swim Ontario to use such materials for the development of newsletters, web articles, display boards, posters, etc. when creating materials and marketing the sport.

For more information on how Synchro Swim Ontario uses electronic communications, photos / videos, refer to their Privacy Policy at www.synchroontario.com.

COMPETITIVE PROVINCIAL, NOVICE AND MINI 2018-2019 PROGRAM

Club Commitments – Provincial Stream

In order to swim with the Markham Synchro Club, both parents & swimmers are required to initial and sign below to indicate they understand and agree to abide by these commitments.

Swimmer: _____

Date: _____

Parent Signature: _____

Athlete Signature: _____

The Provincial Parents meeting will be held at PanAm Markham Pool on Thursday September 20, 8pm.

1. **Team Attendance Commitment:** Initials: Parent: _____ Athlete: _____

Swimmer recognizes the importance of and agrees to participate fully in all practices to the best of their ability including social activities and supporting other teams at competitive events as possible. Coach notification of absence prior to the practice / competition / event is required.

2. **Disclosure of Personal Information Commitment:** Initials: Parent: _____ Athlete: _____

Agree to allow swimmer images and information to appear on Markham Synchro contact lists, social media and marketing / promotional materials.

3. **Uniform Commitment:** Initials: Parent: _____ Athlete: _____

All swimmers will attend the mandatory uniform sizing night, Thurs. Sept 20 at PanAm Markham Pool at 9pm.

Swimmer agrees to wear required equipment (cap, clear goggles, nose plugs) at practice / competitions and also figure / spacing / routine suits and warm up uniforms to represent Markham Synchro at all events. Equipment (including club uniforms, competition suit, spacing suit and figures suit) is not included in fees. Refer to the MKSC Provincial Equipment Fees for pricing.

4. **Volunteer and Fundraising Commitment:** Initials: Parent: _____ Athlete: _____

Agree to participate in Markham Synchro Volunteer & Fundraising activities offered by the Club. Participation in volunteer opportunities & fundraising activities throughout the season may result in reimbursement at the end of the season.

5. **Swimmer Commitment Fee:** Initials: Parent: _____ Athlete: _____

Agree to provide a Swimmer Commitment Fee which is a cheque made to the club to promote a swimmer's commitment to scheduled practices and competitions for their team. This fee may result in reimbursement at the end of the season if the swimmer is not absent from practice prior to key competitions. Selected practices may be cancelled at the head coach's discretion or pool availability.

Junior Team - February 11 to March 3, 2019; March 28 to April 14, 2019; May 27 to June 9, 2019

13-15 Team - February 11 to March 3, 2019; March 28 to April 14, 2019; May 27 to June 9, 2019

11-12 Team - January 18 to February 10, 2019; March 28 to April 14, 2019; May 10 to May 26, 2019

10U Team - January 18 to February 10, 2019; May 10 to May 26, 2019

COMPETITIVE PROVINCIAL, NOVICE AND MINI 2018-2019 PROGRAM

Club Commitments – Novice / Mini Stream

In order to swim with the Markham Synchro Club, both parents & swimmers are required to initial and sign below to indicate they understand and agree to abide by these commitments.

Swimmer: _____

Date: _____

Parent Signature: _____

Athlete Signature: _____

The Novice Parents meeting will be held at PanAm Markham Pool on Thursday September 20, 7pm.

1. Team Attendance Commitment:

Initials: Parent: _____ Athlete: _____

Swimmer recognizes the importance of and agrees to participate fully in all practices to the best of their ability including social activities and supporting other teams at competitive events as possible. Coach notification of absence prior to the practice / competition / event is required.

Competitions are mandatory and attendance is required at both figure and team events as each meet is a prerequisite for the next competition. Failure to attend will result in the athlete being disallowed from further competitions and swimming as an alternate for the remainder of the year.

2. Disclosure of Personal Information Commitment:

Initials: Parent: _____ Athlete: _____

Agree to allow swimmer images and information to appear on Markham Synchro contact lists, social media and marketing / promotional materials.

3. Uniform Commitment:

Initials: Parent: _____ Athlete: _____

All swimmers will attend the mandatory uniform sizing night, Thurs. Sept 20 at PanAm Markham Pool at 7:30pm.

Novice / Mini - Swimmer agrees to wear required equipment (cap, clear goggles, nose plugs) at practice / competitions and also figure / routine suits and team shirt to represent Markham Synchro at all events. Equipment (including competition suit, figures suit and team shirt) is not included in fees. Refer to the MKSC Novice Equipment Fees for pricing.

4. Swimmer Commitment Fee:

Initials: Parent: _____ Athlete: _____

Agree to provide a Swimmer Commitment Fee which is a cheque made to the club to promote a swimmer's commitment to scheduled practices and competitions for their team. This fee may result in reimbursement at the end of the season if the swimmer is not absent from practice prior to key competitions. Selected practices may be cancelled at the head coach's discretion or pool availability.

All Teams - January 18 to February 10, 2019; April 10 to May 5, 2019