

North Oakland Waves



North Oakland Waves Swim Team

**Returning Swimmer
Registration
August 25th
5p-8p**

**New Swimmer
Registration
August 26th
5p-8p**

Evaluations will be done on both nights in case you are not sure of which group you need to be placed in. While you register meet Mike Weaver the Waves new head coach.
New swimmers make sure you bring your suit!



Come make *WAVES* this fall on the North Oakland Waves (NOW) Swim Team!

NOW is a family-friendly team based out of the **North Oakland Family YMCA** offering competitive swimming for all age groups.

Instruction, technique, yardage, positive work ethic, team building, and loads of fun is the NOW experience.

NOW is a dual affiliated team, swimming both YMCA and USA meets.

NOW offers a year round swim program. Our Short Course season runs September through March. We encourage swimmers to attend as many practices as possible, and offer multiple practice sessions realizing families have other activities and obligations. We encourage participation in meets and offer both local and travel meet opportunities. Whether a developing or highly competitive, seasoned swimmer, we have a place for you. Swimmers will be placed in groups by ability, not necessarily by age. Minimum ability to begin in group 1 is to swim one-length each of rudimentary front crawl and back crawl.

NOW is the time to **"Catch Our Wave"** by visiting us at www.nowswimming.com or contact our Mike Weaver at mweaver@nowswimming.com.

North Oakland Waves 2009/2010 Short Course Season Registration Instructions

Step 1: Register with the YMCA

- * Swimmers must have a monthly YMCA membership (youth, teen, or family) in order to participate. Memberships are available at the North Oakland YMCA courtesy desk. Memberships can be taken care of at registration.

Step 2: Register with NOW

- * Fill out NOW registration form
- * Payment can be made in full or, by 1 initial payment and 5 monthly payments through EFT drafting. Oct-Feb. HS girls and boys see below.
- * All Swim meet payments must be done through team unify at www.nowswimming.com
- * If registering more then one child a sibling rate does apply. Any additional child will receive 10% off

Step 3: Register with Michigan Swimming

- * Fill out one form per swimmer
- * Pay \$53.00 annual per swimmer fee (this fee is required)

Step 4: Conclusion

- * Meet the new head Coach Mike Weaver
- * Fill out all appropriate forms and hand in at Registration Open House
- * All check need to be made out to the North Oakland YMCA with NOW in the memo section.

Group #	Swim Fees before August 26th	X	# of Swimmers	=	Total
Group 1	Initial Payment of 145.00 and 5 monthly payments of 71.00	X		=	
Group 2/3	Initial Payment of 220.00 and 5 monthly payments of 110.00	X		=	
Group 4/5	Initial Payment of 246.00 and 5 monthly payments of 125.00	X		=	
HS Boys	Initial Payment of 215.00 and 2 monthly payments of 105.00 (Oct/Nov)	X		=	
HS Girls	\$75.00 To hold spot on team (non-refundable). Initial Payment of 117.00 due on Nov 7th and 3 monthly payments of 96.00	X		=	
	Michigan Swim Registration \$53.00	X		=	
	Total Payment Due			=	

The team will be capped!!
Once the team is capped a wait list will be created.

**NORTH OAKLAND WAVES
REGISTRATION AND EMERGENCY FORM**

Please complete both sides of this form.

Swimmer name _____ M.I. _____ Gender M / F DOB _____
Address _____ City _____ Zip _____
Email address (for team communication) _____
Home phone _____ parent cell # _____
Father's name _____ Mother's name _____
Emergency Contact (other than parent) _____
Emergency contact phone # _____
High School swimmer? YES NO

In case of accident or serious illness, I request that the YMCA staff contact one of the persons listed above. If the YMCA is unable to contact such persons, I authorize the YMCA to call the physician listed below. If impossible to reach my physician, and the situation requires emergency attention, I give my permission to the YMCA staff to make necessary emergency arrangements. Any obligations or medical expenses associated with emergency services are my responsibility, the parent/guardian.

Parent/guardian signature _____ date _____
Parent/guardian (please print name) _____

Physician's Name _____
Physician's phone# _____

SWIMMER HEALTH HISTORY

Any physical restrictions/limitations the coaches should know about? _____

Any medical restrictions/limitations the coaches should know about? _____

Allergies _____
Current Medications (please list) _____

**ONLY NEW SWIMMERS WILL RECEIVE A SHIRT AND CAP. IF NEEDING A NEW
CAP OR SHIRT THEY WILL BE AVAILABLE ON THE WEBSITE.**

Swimmer Shirt size (circle one) YM YL AS AM AL AXL

I realize I am signing up for NOW Swim Team. I understand the YMCA monthly membership is separate and required to participate. I also understand that if I want my membership canceled I must do so at the YMCA, on a cancellation form, 30 days in advance.

Print parent/guardian name _____
Parent/guardian Signature _____ date _____



USA SWIMMING

**2010 ATHLETE REGISTRATION APPLICATION
LSC: MICHIGAN SWIMMING, INC.**

REG. DATE / OFFICE USE ONLY

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PLEASE PRINT LEGIBLY • COMPLETE ALL INFORMATION:

LAST NAME	LEGAL FIRST NAME	MIDDLE NAME

PREFERREO NAME	DATE OF BIRTH (MO./DAY/YR.)	SEX (M/F)	AGE	CLUB CODE	NAME OF CLUB YOU REPRESENT

FATHER/GUARDIAN LAST NAME	FATHER/GUARDIAN FIRST NAME	MOTHER/GUARDIAN LAST NAME	MOTHER/GUARDIAN FIRST NAME

MAILING ADDRESS

CITY	STATE	ZIP CODE

AREA CODE	TELEPHONE NO.	FAMILY/HOUSEHOLD E-MAIL ADDRESS

U.S. CITIZEN? YES NO

ARE YOU A MEMBER OF ANOTHER FINA FEDERATION? YES NO

IF YES, WHICH FEDERATION: _____

- DISABILITY:**
- A. Legally Blind or Visually Impaired
 - B. Deaf or Hard of Hearing
 - C. Physical Disability such as amputation, cerebral palsy, dwarfism, spinal injury, mobility impairment
 - D. Cognitive Disability such as mental retardation, severe learning disorder, autism

- RACE AND ETHNICITY** (You may make up to two choices if appropriate):
- Q. Black or African American
 - R. Asian
 - S. White
 - T. Hispanic or Latino
 - U. American Indian & Alaska Native
 - V. Some Other Race
 - W. Native Hawaiian & Other Pacific Islander

MAKE CHECK PAYABLE TO:
MICHIGAN SWIMMING, INC.

MAIL APPLICATION & PAYMENT TO:
MICHIGAN SWIMMING OFFICE
PO BOX 1784
MIDLAND, MI 48641-1784
Email: jbcartmill@hughes.net
231-690-5847

REGISTRATION FEE	
USA Swimming Fee	\$46.00
LSC Fee	8.00
TOTAL DUE	\$54.00

YEAR LAST REGISTERED: _____ IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2009, ENTER THAT CLUB CODE: _____ LSC CODE: _____ AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB: _____

SIGN
HERE x _____
SIGNATURE OF ATHLETE, PARENT OR GUARDIAN

USA Swimming occasionally makes its membership list available to its marketing partners. Please notify USA Swimming's Member Services Dept. at 719/866-4578 if you do not wish to receive these mailings.

- Check if you would like to learn more about USA Swimming's community initiatives
- Check if you would like to receive the electronic USA Swimming Newsletter (must be 13 years of age or older)