



# Master Swim Program Registration 2011

Fremont - Indoor

The **MASTER SWIM PROGRAM** Beneficial for all adults (and older youth) looking for an early morning, structured with drills, swim workout. The Master Swim Program gives individuals great fitness workouts and a chance to receive professional stroke instruction. The program offers drills that have been designed by World Champion Head Coach Xiaohong Wang, stroke refinement and endurance improvement, and promotion of personal lifetime fitness. Participants must be 15 years or older and bale to swim 100 yards in Freestyle and Backstroke (or Breaststroke).

<b>SWIMMER 1</b>	First & Last Name	SEX <input type="checkbox"/> M <input type="checkbox"/> F Birth Date ____/____/____
<b>SWIMMER 2</b>	First & Last Name	SEX <input type="checkbox"/> M <input type="checkbox"/> F Birth Date ____/____/____
<b>PARENT</b>	First & Last name If swimmer(s) under 18 yo.	<b>EMAIL</b> <b>*Required</b>
<b>ADDRESS</b>	Street	
	City/State	Zip
<b>PHONE</b>	Home Phone	Cell Phone

For safety of swimmers, please list medical conditions/disabilities the above swimmer(s) has: (i.e. asthma, diabetes, epilepsy/seizures, allergies, and etc.)  
 \_\_\_\_\_ (All information disclosed to Calphin will remain confidential)

Program Details	Due & Fee	
<b>PREREQUISITES:</b> Age 15 or older and able to swim 100 yards in Freestyle, and Backstroke (or Breaststroke).	<b>Annual Registration Fee: \$25</b>	(Office ONLY) Start Date: _____ Exp. Date: _____
<b>SCHEDULE :</b> Tuesday & Thursday 7:55-8:55am	<input type="checkbox"/> \$25 x _____ = \$ _____	
<b>COST :</b> \$52/month due before your first day (registration must be completed before intended first swim of the month)	<input type="checkbox"/> First Month Fee \$ _____ x _____ = _____ (Amount x # of swimmers)	
<b>PRORATE OPTION (for mid-month drop in) :</b> 1 <sup>st</sup> - 10 <sup>th</sup> \$52      11 <sup>th</sup> - 20 <sup>th</sup> \$35      21 <sup>st</sup> - end \$18	<input type="checkbox"/> <b>First Week Discount *</b> \$ 11.50 x _____ = - _____ <i>*New Swimmer Only- must register for a full month to receive discount</i>	
	<input type="checkbox"/> Prepay Months (2mos. max) \$ _____ x _____ = _____ (Amount x # of swimmers)	
	<input type="checkbox"/> Membership Discount (10% off monthly fees) = - _____ (Off the tuition w/ membership sustained thru end of session)	
	ID #(s) _____	
	<b>Total Amount (Registration and Tuition):</b> \$ _____	

**Program Policy:**

The registration minimum to open the program is 8 swimmers. Please be aware that your requested program may be rescheduled or cancelled if enrollment is low and in that case a credit or refund will be issued at this time.

- If swimmer misses a practice, they forfeit the time. No reschedules, makeup practices, or refunds are available.
- Cancellations after 1st day of practices are subject to \$20 fee. Registration fee is non-refundable after the first practice of the month.
- If practices are cancelled due to pool maintenance or accidents, club credit will be issued, but no makeup practices or refunds.
- If a documented emergency keeps the swimmer from practice, club credit may be issued (within 2 weeks of missed practice), no refunds.
- Bounced check subjected to \$25 charge.

Please see next page (back side) for waiver and signature page.

FOR OFFICE USE ONLY	
START DATE _____ Amount Rcvd: \$ _____	<input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> DBT # _____ Staff Initials: _____
<b>How did they hear about us?</b> <input type="checkbox"/> Website <input type="checkbox"/> Pamphlet <input type="checkbox"/> Friend <input type="checkbox"/> Drive By <input type="checkbox"/> Other _____	
STAFF : (Initial & Date) _____	Excel Sheet _____ Get Physical _____ Date Stamp _____