

Registration Form 2014-2015

Columbia Varsity Swim School Information Fall 2014 and Winter 2015

12&under**: Tue,Thu -- 6-7pm
Sun - 11-12noon

** there may be situations where, based on ability, exceptions will be made to age groupings.
**practices subject to cancelation/change due to building closures, university swim meets or other university obligations.

Try Outs	Tuesday Sept 9 th and Thursday Sept 11 ^h - New Swimmers Only		
Session 1	Sep. 16 - Dec. 18 th (Thanksgiving Week is off)	TThSu	cost: \$450
Session 2	Jan 20 th - May 14 th (no practice March 16-20 - CU Spring Break)	TThSu	cost: \$450

-checks to "Columbia University"

-participation is up to the discretion of the family. We recommend attending all weekly session for maximum skill development. **Fees will not be prorated** due to other sports, classes, etc.
-Once checks are deposited, there will be no refunds.
-Competitive meets are not a focus of this program. Skill development is the focus and meet participation is at the discretion of the coaches.

IMPORTANT!! If you are a returning participant, we must receive registration forms and check by **September 15th**. At that time, we will open registration to new participants and we **WILL NOT BE ABLE** to guarantee a space for the fall. There is a high demand from new swimmers, so we recommend registering by **September 15th**. *Emails will not* save your space in the program.

All swimmers and parents please wait in the spectator stands until coaches invite the swimmers to the pool. College varsity swim team practices will be going on until we start our practice. Please have your child refrain from running and any horse play once they enter the Dodge Fitness Center. Swim caps are required for anyone with hair at shoulder length or longer.

For any question please Coach Gustavo gsl2106@columbia.edu or coach Jim jbb2@columbia.edu

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Swimmer Name _____

Date of Birth _____ Age _____

Address _____

City _____ State _____ Zip _____

Parent Names _____

Parent emails _____

Parent Cell #'s _____

If your child is new to the program, please share a few sentences about his/her past swimming experience:

Methods of payment: Check to "Columbia University"

Mail form and payment to: Columbia Men's Swimming
3030 Broadway, Mail Code 1917
NY, NY 10027

Marcellus Hartley Dodge Physical Fitness Center

RELEASE OF LIABILITY

In consideration of gaining membership or being allowed to participate in the activities and programs at the Marcellus Hartley Dodge Physical Fitness Center (“Dodge Fitness Center”) and to use its facilities and equipment, I hereby agree to release, indemnify, and hold harmless Columbia University and its trustees, officers, agents, and employees, from any and all responsibilities or liabilities for injuries or damages arising out of my participation in any activities or my use of equipment in the Dodge Fitness Center, except for claims due to the gross negligence or willful misconduct of Columbia University or its trustees, officers, agents, and employees.

I understand and am aware that participation in any type of physical activity, including the use of equipment, is potentially hazardous. I also understand that these physical activities involve a risk of injury and even death and that I am voluntarily participating with the knowledge of the dangers involved.

I do hereby acknowledge that it was recommended that I obtain a physician’s approval prior to my participation in any of the activities at the Dodge Fitness Center. I acknowledge that I have either had a physical examination and have been given medical clearance to participate, or that I have decided to participate in activities and/or use of equipment at the Dodge Fitness Center without medical clearance.

I hereby agree to accept, knowingly and voluntarily, any and all risks of injury arising out of my participation in any the Varsity Swim School at the Dodge Fitness Center.

Last Name (Print)

First Name (Print)

UNI (if applicable)

Signature

Date

Signature of parent or legal guardian if under 18 years of age:

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Parent/Legal Guardian Name

Parent/Legal Guardian Signature

Date