



FALL 2023 : M*C*A*L swim team at St. Vincent's One Nineteen

schedule subject to change per government guidelines, USA Swimming guidelines, facility guidelines -
when the team attends a swim meet (weekends) there will NOT be practices

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	Recruits* 5:50-6:30		Recruits* 5:50-6:30		Captains 4:00-5:45
Sergeants 6:30-7:30	Sergeants 6:30-7:20		Sergeants 6:30-7:20		Lieutenants II 4:00-5:15
	Lieutenants I 6:30-7:30	Lieutenants I 6:30-7:30	Lieutenants I 6:30-7:30	Lieutenants I 4:00-5:00	Lieutenants I 4:00-5:00
Lieutenants II 7:30-8:45	Lieutenants II 7:30-8:45	Lieutenants II 6:30-7:45	Lieutenants II 7:30-8:45	Lieutenants II 4:00-5:15	Recruits 4:00-4:40
Captains 7:30-9:00	Captains 7:30-9:00	Captains 7:30-9:00	Captains 7:30-9:00	Captains 4:00-5:30	Sergeants 4:45-5:45

This practice schedule has been approved for fall 2023, however I may need to tweak times and levels depending on the skills of those signed up for team this fall. As has been the case since fall 2021, we are at the mercy of the facility and COVID - If we are TEMPORARILY shut down we will have drylands in place of practices either in person or via ZOOM.

When possible I will try to get times at Crossplex, Brook Highland or other pools for dive practices using starting blocks either in addition to or in place of another practice. There may be a small fee to help cover pool rental at these locations

* We do not have lanes reserved for Recruits until 6:00pm on Tuesday/Thursday, but I feel sure we should be able to get started in at least one lane most all days (in the past, we have had ZERO TROUBLE with this). If there is ever a day when lanes are all reserved and in use by members until 6:00, we will use the therapy pool or do some deck work until a lane opens for us at 6:00. We definitely will have pool space from 6:00-6:30

St. Vincent's Location FEE STRUCTURE				
LEVEL	monthly FEES 9m commitment (SEPT-MAY)	monthly FEES 5m commitment (SEPT-JAN or JAN-MAY)	monthly FEES no commitment	TOTAL DAYS
Recruits	\$75	\$85	\$95	3 offered-choose 2 max per week
Sergeants	\$90	\$100	\$110	4 offered-choose 3 max per week
Lieutenants I	\$100	\$110	\$120	5 offered-choose 4 max per week
Lieutenants II	\$110	\$120	\$130	6 offered-choose 5 max per week
Captains	\$120	\$130	\$140	6 offered-6 max per week



Groups and Descriptions

The three price levels next to each group are monthly fees based on a 9month commitment / 5month commitment(Sept-Jan or Jan-May) / flex(no commitment)

Recruits: \$75/\$85/\$95 per month

Swimmers learn Freestyle, Backstroke, Beginning Butterfly, Breaststroke kick. Practices include swimming 1/2 lengths or full laps. Mini meets encouraged/ other swim meets optional. (40 minute practice time) Max 2 days/week

Sergeants: \$90/\$100/\$110per month

Swimmers learn the basics of 4 competitive strokes including turns. Focus is on improving technique and building stamina. Endurance and clock intervals introduced. All swim meets are recommended at this level. (50-60 minute practice time) Max 3 days/week

Lieutenants I: \$100/\$110/\$120per month --- Lieutenants II: \$110/\$120/\$130per month

A higher level of stroke and turn awareness is taught with emphasis on competitive swimming. turns, advanced drills and racing skills introduced, endurance building sets introduced. meets are encouraged at these levels.
- (60 minute practice time) Max 4 days/week
minute practice time) Max 5 days /week

IM
Swim
Lieutenant I
Lieutenant II - (75

Captains: \$120/\$130/\$140per month

Challenging practices for more committed swimmers. An endurance-building level with continued emphasis on technique and personal improvement. Swim meets are strongly encouraged for all swimmers at this level. (90-105 minute practice times - Saturday practices are longer and are targeted endurance training days) Max 6 days/week

Mandatory Fees

Team Registration Fee: \$240 includes one team tshirt, one team cap, SES/LSC fees and monthly team admin dues. PAID ANNUALLY TO MCAL via cash, check or VENMO @MCAL-SwimTeam

USA SWIMMING REGISTRATION: Your MCAL registration no longer includes your USA Swimmng registration (new USA Swimming policy beginning in fall 2022) FOR LIABILITY REASONS, YOU ARE REQUIRED TO GO ONLINE AND REGISTER YOUR SWIMMER PRIOR TO ATTENDING THEIR FIRST OFFICIAL PRACTICE IN SEPTEMBER. Please be sure to put in your swimmers LEGAL NAME and info in carefully as this info creates their USA SWIMMING ID. If they have been a USA Swimming member in the past, you should be able to link their old info to the new registration. RENEWALS AND NEW MEMBERS FOR 23/24 MUST BE COMPLETED DURING THE MONTH OF SEPTEMBER (August is still considered 22/23) <https://omr.usaswimming.org/omr/welcome/E39EE34CB6CC4A>

PLEASE NOTE If we are temporarily restricted from pool use, we will use ZOOM for drylands during any shut down period.

In order to compete in any USA Swimming meet you must be registered by the 1st day of that month.

DETAILS, Details, Details....**SWIM MEETS FOR FALL/EARLY WINTER 2023/2024 (short course season)**

Get ready to race! Don't be afraid to participate - meets are part of the developmental process and are not just for the "best" or "experienced" swimmers

MINI MEETS - These laid back, inexpensive and fun meets are right here in our own pools. They are start to finish in just a couple hours and are a great way to keep tabs on your progress, earn some ribbons/awards, socialize with your team, and/or experience competition without the big venue/big time commitment/price tag of the USA Swimming sanctioned meets. We do plan to have several mini meets (typically during Saturday practice time) at St. Vincents One Nineteen this season!

USA SWIMMING SANCTIONED MEETS - These meets are one, two or three day long events occurring on weekends. They typically have a flat fee or a per event fee and cost \$40-100 per swimmer to attend. I have posted a tentative schedule below; however **NOT ALL TEAMS HAVE POSTED THEIR MEETS** - depending on the final makeup of the 2022/23 MCAL team, we may change meets to best suit the needs of the team. **HIGH SCHOOL SWIMMERS ONLY** who qualify with their high school teams will have **SECTIONALS** on November 17-18 and **STATE** on Dec 1-2. February 2-4 is District Championships - **ALL MCAL SWIMMERS** are strongly encouraged to attend; this is also the 8&U championships, so our youngest swimmers are doubly encouraged to participate! February 15-18 is Southeastern Championships - Swimmers who have made a qualifying time during the season will be encouraged to attend.

TENTATIVE MEETS: swim meets being considered and dates....

date	type/name	site	city,state
Sept 23	mini meet	St V 119	Birmingham, AL
Oct 7	CTA	Crossplex	Birmingham,AL
Oct 28	Tentative Halloween Party	St V 119	Birmingham, AL
Nov 3-5	BSL	Crossplex	Birmingham, AL
Nov 17-18	HIGH SCHOOL Sectionals	Crossplex	Birmingham, AL
Nov 18	tentative mini meet	St V 119	Birmingham, AL
Dec 1-2	HIGH SCHOOL State Meet (must qualify)	Auburn University	Auburn, AL
Dec 3	AUB	Auburn University	Auburn, AL
Dec 9	CTA Santa Splash	Crossplex	Birmingham, AL
Dec TBD	mini meet / Holiday party	St V 119	Birmingham, AL
Jan 6-7 or Jan 12-14	BSL or AUB	Crossplex or Auburn University	Birmingham, AL or Auburn, AL
Jan TBD	mini meet	StV119	Birmingham, AL
Feb 2-4	Districts	Crossplex	Birmingham, AL
Feb 15-18	Southeastern Championships (must qualify)	Huntsville	Huntsville, AL

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ALL remaining pages should be filled out and returned



2022-2023 Registration Form
Magic City Aquatic League N. Shelby

Please print legibly in all blank spaces and sign

Reg fees paid by: Check# _____ Cash _____ Venmo _____

Name: _____
Last First Middle

Preferred name: _____ T-shirt size(s): _____

Birthdate: _____ Current age: _____ Gender: _____ Ethnicity: _____ Disability? _____
MM/DD/YYYY for USA Swimming Diversity stats

Address: _____
Street City State Zip

Are you a returning or a new swimmer? Returning _____ New _____ Previous Swim Club: _____

Father/Parent (Guardian)1 Info Mother/Parent (Guardian)2 Info:
Name
Home phone
Work phone
Cell phone/text
Email address

Please note EMAIL and GroupMe are used for loads of communication. Please ensure your email is current and monitored regularly. If you plan to practice at the North Shelby location, please download the GroupMe app from the app store (free) and you will be added to a group for team updates in addition to the email list.

I was referred to the program by: _____

Emergency Contact: _____

Name Relationship Phone

I agree the above information may be made public only in the form of a team roster. I understand there will be a \$1.00 charge added to each individual event fee entered for each meet to help cover the expenses for coaches' travel and special awards. Also, I will be responsible for entry fees once entered in a meet even if my family member does not attend the meet for any reason, as MCAL will have to pay for the fees anyway. I understand that over the course of the season the practice schedule may change due to pool availability, some weekend practices will be cancelled when the team is competing at meets and that there will be a shortened practice schedule during the Christmas holidays and Spring break. I understand that if we have paid in advance and my child decides to quit for any reason no refunds will be issued and I will be responsible for payment of any unpaid balances. I agree to indemnify and hold MCAL/Coach Cal/Coach Dawn from and against any claims, liabilities, actions, damage, and expenses arising in connection with participation in any USA Swimming practice or function. Also, I understand monthly fees are due by the 1st of each month and will be considered late after the 5th. Once late, I understand there will be a \$25.00 late fee per swimmer. I UNDERSTAND THAT IF I CHOOSE TO COMMIT TO THE 5 MONTH OR 9 MONTH DISCOUNTED FEE SCHEDULE, I WILL BE EXPECTED TO PAY MONTHLY FEES DURING THAT ENTIRE TIME FRAME REGARDLESS OF IF MY CHILD PARTICIPATES OR NOT.

PARENT SIGNATURE: _____ Date: _____

MCAL coaches are dedicated to promoting the sport of swimming for ages 4 to 18 by making the swimming experience fun and fair for ALL swimmers. Your child's improvement is our motivation. Our mission is to provide a swimming program for everyone no matter their swimming level. For our more dedicated swimmers, we emphasize personal improvement, self-discipline and self-motivation through various incentives and awards. We strive to not only develop successful swimmers, but successful individuals as well. Welcome to the MCAL family!

Medical History Questionnaire

Swimmer's name: _____

Doctor: _____ Phone: _____

Insurance Co: _____ Policy#: _____

For the following, please circle YES or NO and provide additional details where requested

Are you allergic to any medication? YES NO

If YES, please list: _____

Do you take any prescribed medication on a permanent or semi-permanent basis? YES NO

If YES, please list: _____

Have you ever been told by a doctor that you have had any of the following:

Epileptic Seizure	YES	NO	Anemia	YES	NO
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Epilepsy	YES	NO	Sickle Cell Anemia	YES	NO
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Diabetes	YES	NO	High Blood Pressure	YES	NO
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Do you have, or have you ever had the following:

Heart Disease	YES	NO
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Lung Disease	YES	NO
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Kidney Disease	YES	NO
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Asthma	YES	NO	uses rescue inhaler? Y/N
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Hernia	YES	NO
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Concussion or other head injury in the past three (3) years	YES	NO
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Neck injury involving bones, nerves, or discs	YES	NO
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Broken bones in the past two (2) years	YES	NO
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Shoulder injury or surgery in the past two (2) years	YES	NO
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Back injury	YES	NO
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Frequent back pain	YES	NO
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Knee injury or surgery in the past two (2) years	YES	NO
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Ligament or cartilage injury	YES	NO
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Pins, screws or plates in your body	YES	NO
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Severe ankle sprain in the past two (2) years	YES	NO
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Fainting	YES	NO
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Do you have any other conditions of which we should be aware (ulcers, food or insect allergies, delays or learning differences)?

YES NO

If YES, please list: _____

Please give the date of your last tetanus shot: _____

My signing below, I attest the questions on this form have been answered truthfully to the best of my knowledge.

parent signature

MM/DD/YYYY

FACILITY/TEAM POLICIES and POLICIES for your swimmer's safety...

All swimmers must purchase and bring their own equipment to practices including a minimum of the following: swimsuit, waterbottle, towel(s), goggles, cap (if desired), kickboard, fins. Lieutenant levels I/II and Captains should also have a pull buoy and paddles. All equipment should be labeled with your name. All swimmers should keep their swim equipment (everything but the towel) by their lane in a mesh bag. No equipment will be shared or borrowed. No caffeinated/sugary beverages please - water or a REAL sports drink (e.g. Gatorade) only. PLEASE NOTE THAT ST. VINCENT'S ONE NINETEEN DOES NOT ALLOW TWO PIECE SUITS FOR GIRLS OTHER THAN TANKINIS THAT COVER THE MIDRIFF WELL.

Swimmers under the age of 12 must be picked up by their ride inside the pool area or walked out by another designated parent. This is especially important as the days get shorter and it is DARK out after practice. Swimmers will enter and leave the facility through the main doors near the fountain only. Captains must exit the facility immediately after weekday practices (no showers) as One Nineteen closes at 9:00

Practices will be held per the posted schedule with potential cancelations due to swim meets and the occasional travel date/personal conflict for Coach Dawn. Practices are typically held on the normal schedule during most school holidays unless the facility is closed. As of this time, there will be no practice on Halloween, Thanksgiving or the day after, Christmas Eve/Day, New Year's Eve/Day as well as Spring Break week (last week of March). There will be no fee proration during these breaks. Coach Llia will be coaching all Friday practices during high school football season as Coach Dawn has volunteer obligations each Friday with her youngest daughter's band.

I understand that meets are TBD and will tentatively occur about every 2-4 weeks throughout the season. I understand there will be no practices offered on meet days and if I choose not to participate in the swim meet then I will not have a practice option on that date. I understand that I should come prepared to practices with my equipment and water bottle. I understand the pick up policy.

Parent signature and date

Swimmer(s) signature and date

I have read and understand the monthly fee schedule for 2023/2024 I have decided to participate at the following level:

- 9-month commitment (September-May) least expensive

\$75 Recruits	\$90 Sergeants	\$100 Lieutenant I	\$110 Lieutenant II	\$120 Captain
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- 5-month commitment (September-January OR January-May) \$10 additional per month

\$85 Recruits	\$100 Sergeants	\$110 Lieutenant I	\$120 Lieutenant II	\$130 Captain
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- no commitment (monthly membership, I may take off any month by letting Coach know before I attend any practices in any given month; if I attend any practices in any given month I am expected to pay the full fee for that month) \$20 additional charge per month

\$95 Recruits	\$110 Sergeants	\$120 Lieutenant I	\$130 Lieutenant II	\$140 Captain
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MEMBERS of ST VINCENT'S ONE NINETEEN ENJOY \$10 OFF FEES EACH MONTH.

Please indicate if you are a member below:

- My family has a One Nineteen membership. Our membership number has been placed in this blank for verification. I will indicate the number on each month's payent form so it can be logged in when payments are processed #_____

A FAMILY MAX on fees of \$400/family per month will be in place. Indicate if you qualify below:

- My family has several participating swimmers and will exceed the FAMILY MAX if we total the fees together for all of our swimmers. We intend to pay the family max fee each month.

USA Swimming Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is reported to be extremely contagious. The state of medical knowledge is evolving, but the virus is believed to spread from person-to-person contact and/or by contact with contaminated surfaces and objects, and even possibly in the air. People reportedly can be infected and show no symptoms and therefore spread the disease. The exact methods of spread and contraction are unknown, and there is no known treatment, cure, or vaccine for COVID-19. Evidence has shown that COVID-19 can cause serious and potentially life-threatening illness and even death.

USA Swimming, Inc., MCAL Swimming, St. Vincent's One Nineteen, Samford University, Swim with Coach Cal, Swim with Coach Dawn, cannot prevent you (or your child(ren)) from becoming exposed to, contracting, or spreading COVID-19 while participating in USA Swimming events. It is not possible to prevent against the presence of the disease. Therefore, if you choose to participate in a USA Swimming event, you may be exposing yourself to and/or increasing your risk of contracting or spreading COVID-19.

ASSUMPTION OF RISK: I have read and understood the above warning concerning COVID-19. I hereby choose to accept the risk of contracting COVID-19 for myself and/or my children in order to participate in a USA Swimming event. Participating in the event is of such value to me and/or to my children that I accept the risk of being exposed to, contracting, and/or spreading COVID-19 in order to participate.

WAIVER OF LAWSUIT/LIABILITY: I, on behalf of myself, my heirs, assigns, and personal representatives, hereby forever release and waive my right to bring suit or any claim(s) against USA Swimming, Inc. and its officers, director, managers, officials, agents, employees or other representatives (MCAL, St. Vincent's One Nineteen, Samford University, Swim with Coach Cal, Swim with Coach Dawn) in connection with exposure, infection, and/or spread of COVID-19 related to participating in a USA Swimming event. I understand this waiver means I give up my right to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any claims I may have to seek damages, whether known or unknown, foreseen or unforeseen.

CHOICE OF LAW/SEVERABILITY: I understand and agree that the law of the State of Alabama will apply to this contract. I further acknowledge that THIS CONTRACT IS INTENDED TO BE FULLY SEVERABLE, and that if any portion of this contract is held invalid, it is agreed that the balance the contract shall continue in full legal force and effect. That shall include modifying the contract to allow the remainder of claims to be waived and released in the event that the inclusion of any particular type of claim is found to be invalid or contrary to public policy.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS RELEASE AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE.

Signature: _____ Date: _____

Name (printed): _____

I am the parent or legal guardian of the minor named above. I have the legal right to consent to and, by signing below, I hereby do consent to the terms and conditions of this Release on behalf of myself, my child, and our heirs, assigns, and personal representatives.

Signature: _____ Date: _____

Name (printed): _____

MCAL Swimmer Code of Conduct and Swimmer Contract - 2023/2024 Season

I, _____, pledge to abide by the following policies and code of conduct as a member of MCAL. I understand that membership with MCAL is a privilege, not a right, and that my membership is dependent on my behavior and my willingness to adhere to team policies. I understand that this contract is not only for the benefit of the team, but for me as well. I understand that failure to live up to my obligations as a member of MCAL will put my status with the team in negative standing, and repeated abuses will result in disciplinary action up to and including the termination of my membership. As a member of MCAL, I agree to the following statements:

I understand that I should give 100% effort and have a positive attitude at each practice and at each competition. This means that I should make every effort to arrive on time and that I should bring all of my equipment (including my water bottle) to my lane at the start of each practice. My success and the success of my teammates depend on my ability to positively contribute to the team's goals as well as my own.

Out of respect for my coaches and teammates, I will wear MCAL attire (caps at minimum) at competitions; I will not wear swimming attire from another team, including summer league and college teams.

I understand that my words and actions are a reflection on my team, therefore I pledge to treat all team members, coaches, parents, officials, and opponents with respect. I will be a good sport, cheering on my teammates and encouraging them to do their best both at meets and at practices. I will behave with good sportsmanship whether I win or lose. I will treat teammates and competitors the way I would like to be treated. I understand that poor sportsmanship will not be tolerated by my coach.

I understand that I am a guest at the pools and facilities where my team practices or competes. I will be respectful of each facility by throwing away my used water bottles or other trash, picking up my towels/belongings and by being polite to members of the facility. I will not abuse facilities by littering, destroying property, or misusing any part of a facility. I will not participate in horseplay in any facility at any time including running, pushing, dunking/splashing teammates or others. I will not be excessively loud or rowdy at the pool, in the locker rooms or while walking through the facility to/from practice or at a meet. I want members of all facilities, especially our home pool, to be pleased with the manners of MCAL so that we can continue to enjoy access. Failure to abide by this rule will result in the immediate loss of my privileges to use these facilities.

I know that GLASS is never allowed on any pool deck and will not bring glass containers of any kind to any pool

I will be respectful at all times. Being respectful of my coach means I will not talk while directions are being given, I will not argue when given corrections, and I will be ready when it is time to start the next set by having my goggles and equipment on and by being in the ready position. I will be respectful of officials and volunteers at swim meets. I understand that it is never my place to speak to or question any official at a swim meet; if I have a question I should speak with my coach. I should politely ask my timer for my time at the completion of each race and thank them when they reply.

I will develop both personal and swimming goals for myself each season. I understand that I am not a finished product, and that I must continue to improve in every area of my life. My coach is here to help me in this process, and so I must share my goals and aspirations. As part of my goal setting strategy, I will always know my personal best times and be aware of my events for each swim meet. If I expect others to take my swimming seriously, I have to be the first person to take it seriously—it starts with me!

I will use proper lane etiquette during practice. This includes but is not limited to circle swimming, allowing others to pass me or passing others carefully in the center of the lane, not pulling on other swimmers, and finishing to the wall every time then moving over so others can also finish.

I understand bullying and other harassment will not be tolerated by MCAL nor by USA Swimming. I will not touch another swimmer at any time in a way that is inappropriate. Any language, behavior or attitudes that are considered racist, sexist, homophobic or otherwise inappropriate are against MCAL and USA Swimming guidelines and will not be tolerated. I will only use words I would want used back to me. I will only act in a way I would want others to act towards me. If I know my words or opinions are different from or may offend others, I will keep those words and opinions to myself because I respect my teammates and myself. I understand that MCAL believes that our differences make us stronger and should not divide us. Bullying, discriminatory behavior and harassment of any kind will result in disciplinary measures and ultimately may result in removal from the team.

I will respect the belongings of others. I will not steal, vandalize, hide, or misuse items that do not belong to me. If I find something that does not belong to me, I will give it into a parent or coach.

I will not lie to my coaches, parents, teammates or officials. When I lie, I tell people around me that I cannot be trusted. When I cannot be trusted, people are less likely to want to help me or work with me. I will be honest with myself and those around me.

I will not engage in any behavior that is dangerous or reckless including fighting, horseplay, drugs, alcohol, or playing with weapons. If I see any of my teammates engaging in any of these behaviors, I will tell a parent or my coach immediately. Any behavior that is deemed dangerous or brings discredit to the team will result in immediate disciplinary action up to and including expulsion from the team.

Signed: _____ Date: _____

Name Printed: _____

MCAL Parent Code of Conduct and Contract - 2023/2024 Season

I, _____, agree to help my child live up to the expectations laid out in the MCAL Athlete Code of Conduct. As a parent/guardian, I understand the important growth and developmental benefits that my child's participation fosters. I understand that it is essential to provide my child's coach with respect and the authority to coach the team. I also agree to the following expectations as laid out by USA Swimming and MCAL as guidelines for swim parents:

I will set a good example for my child/children by demonstrating sportsmanship and showing respect and common courtesy at all times to all team members, coaches, competitors, officials, parents, etc. I will also be respectful of all facilities where my child/children swim in practices or competitions by following that facility's rules, etc.

I will get involved by volunteering, observing practices, cheering at meets, and making sure my child has proper equipment including an appropriate suit, goggles and waterbottle at all events. I will talk with my child/children and their coach/es about their progress.

I will refrain from coaching my child from the stands during practices or meets - however I get to be their biggest fan!

I understand that criticizing, name-calling and/or use of abusive language or gestures directed toward coaches, officials, volunteers, any participating swimmer and/or another parent will not be tolerated.

I will never correct an MCAL swimmer during a practice or a meet for any reason. If I have issue with a swimmer I will bring it to the attention of a MCAL coach. It is never OK for a parent to approach, correct or discipline a swimmer who is not their own child at any MCAL event. If I need to correct or otherwise speak to my own child I will discretely remove my child from practice in order to do so, with the permission of the coach so as not to disrupt the practice/competition and/or undermine the authority of the coach.

I will respect the integrity of swim meet officials. I will not at any time attempt to speak to or question an official. If I have an issue, I will speak to my coach. However, I understand that once a call has been made and certified by the referee/marshall, then the call is final. Video evidence from the stands is not valid in overturning swimming disqualifications/calls.

If I have concerns, I will reach out to my coach (Coach Dawn). If I have concerns with my coach, I may reach out to another coach (Coach Cal) or to the aquatics supervisor at St. Vincent's One Nineteen, Casey Wilson.

As a USA Swimming age group team, MCAL Coaches are USA Swimming certified and thus Safe Sport certified. If I have any concerns about my coaches training or behaviors that are not cleared up by talking to them directly or to the facility management, I may contact USA Swimming for guidance at any time.

I will assist my child in setting and striving toward reasonable goals with the help of their coach (such as making a cut for an upcoming meet, successfully executing a flip turn in a meet, or attending practices regularly/being in the water ready to go on time) and assist in teaching my child/children that finishing first is not necessarily always the goal by celebrating all of their successes. I will help them understand that failure is not always bad - sometimes it is a powerful teacher.

Signed: _____ Date: _____



Name: _____ Date of Birth: _____ Date: _____

Cell Phone: _____ E-mail: _____

Guest Agreement and Release of Liability

1) In consideration of gaining access or being allowed to participate in the activities and classes of the St. Vincent's One Nineteen Fitness Center and to use its facilities, equipment, and machinery in addition to the payment of any fee or charge, I do hereby waive, release, and forever discharge St. Vincent's Hospital, Ascension Ventures Corporations d/b/a Fitness One Nineteen, and their respective officers, agents, employees and representatives from any and all responsibilities or liability for injuries or damages resulting from participation in any activities at said facility. I do also hereby release all of those mentioned or others acting on their behalf or in any way arising out of or connected with my participation in any activities of or use of equipment at Fitness One Nineteen.

Please Initial _____

2) I understand and am aware that strength, flexibility, and aerobic exercise including the use of equipment, is a potentially hazardous activity. I also understand that fitness activities involve a risk of injury and even death and that I am voluntarily participating in these activities and using equipment and machinery with knowledge of the dangers involved. I hereby agree to expressly assume and accept any and all risks of injury or death. I understand that my participation in and use of these activities, machines, and equipment is contingent upon my ability to independently, safely and correctly perform exercises. I understand and accept that it is my responsibility to inform the St. Vincent's One Nineteen Health and Wellness staff of significant changes in my health and medical conditions as it relates to exercise.

Please Initial _____

3) I do hereby acknowledge that I have been informed of the need for a physician's approval for my participation in any of the activities and programs of St. Vincent's One Nineteen Health and Wellness center or use of equipment or machinery except as hereinafter stated. I also acknowledge that it has been recommended that I have a yearly and more frequent physical examination and consultation with my physician as to physical activity, exercise, and use of exercise and training equipment. So that I might have recommendations concerning these fitness activities and equipment use. I acknowledge that I have either had a physical examination and have been given a physician's permission to participate, or that I have decided to participate in activity and/or use of equipment and machinery without the approval of my physician and do hereby assume all responsibility for my responsibility for my participation and activities, and utilization of equipment and machinery in my activities.

Please Initial _____

Signature

Date