



THE HEART OF TEXAS AQUATICS TEAM

FOR OFFICIAL USE ONLY
DATE RECEIVED:

SWIMMER EMERGENCY TREATMENT AUTHORIZATION & RELEASE FORM

Swimmer's Names: (Please print neatly)

Table with columns: Last, First, MI, Male/Female, Birth Date. Rows 1, 2, 3.

IN AN EMERGENCY CONTACT:

Name of Parent or Legal Guardian:
Family Address:
Home Phone: Father's Work: Mother's Work:
Father's Cell: Mother's Cell:

IN AN EMERGENCY WHERE NEITHER PARENT CAN BE REACHED
Contact:
Name: Address:
Phone: Alternate Number:
Or Contact the Doctor/Dentist Listed Below:
Name: Name:
Address: Address:
Phone: Phone:

Please state any medical conditions that might impair your child's (children's) participation at poolside or in the pool:

THE HEART OF TEXAS AQUATICS TEAM COACHING STAFF OR OTHER APPOINTEE WILL ATTEMPT TO CONTACT ONE OF THE ABOVE PERSONS, BUT IF NONE OF THE ABOVE CAN BE CONTACTED, THE COACHING STAFF REPRESENTATIVE ON DECK AT THE POOL HAS OUR PERMISSION TO USE THEIR DISCRETION IN SECURING MEDICAL AID IN WHAT, TO THEM, APPEARS TO BE AN EMERGENCY SITUATION. IT IS UNDERSTOOD NEITHER THE HEART OF TEXAS AQUATICS TEAM NOR THE PERSON RESPONSIBLE FOR OBTAINING MEDICAL AID WILL BE RESPONSIBLE FOR THE EXPENSE INCURRED.

I HAVE READ THE STATEMENT AND AGREE TO THE STATEMENT AS IT IS WRITTEN.

Signature of Parent or Legal Guardian: Date:

PERSONAL RELEASE STATEMENT: I UNDERSTAND COMPETITIVE SWIMMING PARTICIPATION MAY HAVE AN ELEMENT OF HAZARD OR INHERENT DANGER AND I TAKE FULL RESPONSIBILITY FOR MY CHILD'S (CHILDREN'S) ACTIONS AND PHYSICAL CONDITION. I AGREE TO INDEMNIFY AND HOLD HARMLESS THE HEART OF TEXAS AQUATICS TEAM AND ITS EMPLOYEES, BOARD MEMBERS AND OFFICIALS FROM ANY LIABILITY, LOSS, COST OR EXPENSE (INCLUDING ATTORNEY'S FEES, MEDICAL AND AMBULANCE COSTS) THAT MAY INCUR AS THE RESULT OF PARTICIPATING IN SWIM TEAM ACTIVITIES.

Signature of Parent or Legal Guardian: Date:

MEDICATION: Acetaminophen ("Tylenol" or other brand names of Acetaminophen) will be given at the coaches' discretion with the signed consent of a parent or legal guardian.

PERMISSION FOR ACETAMINOPHEN: YES NO

Signature of Parent or Guardian: Date:



The Heart of Texas Aquatics Team
2008-2009 TEAM MEMBER CODE OF CONDUCT

- 1. ALL PARTICIPATING HEART OF TEXAS AQUATICS TEAM (HEAT) MEMBERS WILL ABIDE BY THIS CODE OF CONDUCT.

GENERAL

- 2. THE ILLEGAL POSSESSION OR USE OF ALCOHOL, TOBACCO PRODUCTS, OR OTHER UNPRESCRIBED CONTROLLED SUBSTANCES OR UNPRESCRIBED USOC BANNED SUBSTANCES BY ANY ATHLETE IS PROHIBITED. FURTHERMORE, ANY HEAT TEAM MEMBER BEING OR SUSPECTED OF BEING IN THE PRESENCE OF OTHERS (REGARDLESS OF TEAM AFFILIATION) PARTAKING IN ANY OF THE ABOVE ACTIVITIES IS LIKEWISE PROHIBITED.
3. TEAM MEMBERS AND STAFF WILL REFRAIN FROM ANY ILLEGAL OR INAPPROPRIATE BEHAVIOR THAT WOULD DETRACT FROM A POSITIVE IMAGE OF THE HEART OF TEXAS AQUATICS TEAM, NORTH TEXAS SWIMMING LSC AND USA SWIMMING OR BE DETRIMENTAL TO ITS PERFORMANCE OBJECTIVES.
4. ANY DAMAGES TO TEAM PROPERTY OR THE PROPERTY OF OTHERS (INCLUDING OTHER TEAMS) ARE PROHIBITED AND WILL BE THE FINANCIAL RESPONSIBILITY OF THE SWIMMER DOING THE DAMAGE.
5. TEAM MEMBERS WILL DISPLAY THE UTMOST RESPECT AND SPORTSMANSHIP TOWARD COACHES, OFFICIALS, ADMINISTRATORS, FELLOW COMPETITORS AND THE PUBLIC.
6. TEAM MEMBERS WILL ALWAYS ARRIVE FOR ALL PRACTICES, MEETS AND TEAM FUNCTIONS ON TIME.
7. TEAM MEMBERS ARE EXPECTED TO PARTICIPATE IN ALL TEAM FUNCTIONS, FUNDRAISERS, ETC...IN ORDER TO SUPPORT THE TEAM AND PROMOTE TEAM UNITY WHENEVER POSSIBLE.

COMPETITION

- 8. SWIMMERS WILL WEAR AN APPROVED TEAM SWIMSUIT (OR APPROVED RACING SUIT) AND TEAM CAP (WHEN APPLICABLE) AT ALL SWIMMING AND DIVING COMPETITIONS.
9. SWIMMERS ARE EXPECTED TO MEET WITH THEIR COACH BEFORE AND AFTER EACH OF THEIR EVENTS.
10. IN PRELIM AND FINALS MEET, ALL SWIMMERS WHO QUALIFY TO COMPETE IN THE FINALS ARE EXPECTED TO PARTICIPATE IN THE FINALS, UNLESS THE SWIMMER, IN CONSULTATION WITH A COACH, SCRATCHES FROM FINALS CONSISTENT WITH CURRENT SCRATCH PROCEDURES AND RULES. ALL TEAM MEMBERS ARE STRONGLY ENCOURAGED TO RETURN TO THE FINALS SESSIONS WHEN POSSIBLE TO SUPPORT THE TEAM AND TAKE ADVANTAGE OF THE OPPORTUNITY TO LEARN FROM WATCHING THE FINALS.
11. SWIMMERS ARE EXPECTED TO SIT WITH THE TEAM AND PARTICIPATE IN ALL TEAM MEET ACTIVITIES AND TEAM MEETINGS.
12. TEAM MEMBERS AND PARENTS ARE EXPECTED TO DISPLAY PROPER RESPECT AND SPORTSMANSHIP TOWARD COACHES, OFFICIALS, MEET ADMINISTRATORS, AND FELLOW COMPETITORS.
13. AS A MATTER OF TEAM PRIDE AND COURTESY TO THE MEET HOST, TEAM MEMBERS ARE EXPECTED TO LEAVE THE HEAT TEAM AREA IN A NEAT AND CLEAN CONDITION AT THE CONCLUSION AT EACH SESSION OF THE MEET.
14. ALL QUESTIONS SWIMMERS OR PARENTS MAY HAVE CONCERNING MEET RESULTS, AN OFFICIATING CALL, OR THE CONDUCT OF A MEET, SHOULD BE REFERRED TO THE HEAT COACHING STAFF ONLY. OUR COACHES, IN TURN, WILL PURSUE THE MATTER THROUGH APPROPRIATE CHANNELS. IT IS REQUIRED THAT TEAM MEMBERS CHECK WITH THE COACHES PRIOR TO LEAVING A MEET OR OTHER TEAM FUNCTION. SHOULD IT BECOME NECESSARY FOR A SWIMMER TO LEAVE A MEET EARLY, HIS/HER COACH MUST BE NOTIFIED. SWIMMERS MUST NOTIFY THE COACH IN ADVANCE OF THEIR TRANSPORTATION ARRANGEMENTS TO AND FROM MEETS.
16. IN ACCORDANCE WITH SWIMMING/DIVING RULES, SWIMMERS' PARENTS ARE EXPECTED TO REMAIN IN THE SPECTATOR AREA AND OFF THE IMMEDIATE COMPETITIVE DECK UNLESS THEY ARE WORKING THE MEET IN AN OFFICIAL CAPACITY.

VIOLATION OF THE CODE OF CONDUCT RULES

- 1. SWIMMER MAY BE SCRATCHED FROM A MEET.
2. SWIMMER MAY BE SENT HOME IMMEDIATELY FROM PRACTICE OR MEET (AT HIS/HER OWN EXPENSE, SHOULD THIS APPLY).
3. SWIMMER MAY BE SUSPENDED FROM THE TEAM UNTIL THE SWIMMER (AND POSSIBLY PARENT(S)) HAS HAD A CONFERENCE WITH THE HEAD COACH AND APPROPRIATE DISCIPLINARY ACTIONS HAVE BEEN IMPLEMENTED. THIS IS AUTOMATIC WITH VIOLATIONS OF GENERAL RULES 2, 3, 4 AND (IN CERTAIN CASES) 5.
4. SWIMMERS MAY HAVE THEIR MEMBERSHIP WITH THE HEART OF TEXAS AQUATICS TEAM TERMINATED.

IMPLEMENTATION

I, HERBY AGREE TO ABIDE BY THE RULES OF CONDUCT AS SET FORTH IN THE ABOVE DOCUMENT AND ACKNOWLEDGE THAT FAILURE TO DO SO, CAN RESULT IN MY BEING SUBJECT TO DISCIPLINARY ACTION (AND WILL CASES OF VIOLATION OF RULES 2, 3, 4 AND 5).

SWIMMER'S NAME (PLEASE PRINT)

SIGNATURE OF SWIMMER

DATE

SIGNATURE OF PARENT/GUARDIAN*

DATE

SIGNATURE OF PARENT/GUARDIAN*

DATE

* BOTH PARENTS/GUARDIANS, WHEN APPLICABLE, MUST SIGN THIS FORM.



The Heart of Texas Aquatics Team
2008-2009 PARENT / GUARDIAN CODE OF CONDUCT

AS A PARENT / GUARDIAN OF A SWIMMER ON THE HEART OF TEXAS AQUATICS TEAM, I WILL ABIDE BY THE FOLLOWING GUIDELINES:

- 1. I WILL PRACTICE TEAMWORK WITH ALL PARENTS, SWIMMERS AND COACHES BY SUPPORTING THE VALUES OF DISCIPLINE, LOYALTY, COMMITMENT AND HARD WORK.
2. I WILL NOT COACH OR INSTRUCT THE TEAM OR ANY SWIMMER AT A PRACTICE OR MEETS (FROM THE STANDS OR ANY OTHER AREA) OR INTERFERE WITH COACHES ON THE POOL DECK.
3. I WILL DEMONSTRATE GOOD SPORTSMANSHIP BY CONDUCTING MYSELF IN A MANNER THAT EARNS THE RESPECT OF MY CHILD, OTHER SWIMMERS, PARENTS, OFFICIALS AND THE COACHES AT MEETS AND PRACTICES.
4. I WILL MAINTAIN SELF-CONTROL AT ALL TIMES. I WILL KNOW MY ROLE.

SWIMMERS - SWIM

COACHES - COACH
OFFICIALS - OFFICIATE
PARENTS - PARENT

- 5. AS A PARENT, I UNDERSTAND THAT CRITICIZING, NAME-CALLING, USE OF ABUSIVE LANGUAGE OR GESTURES DIRECTED TOWARD THE COACHES, OFFICIALS, OTHER PARENTS AND/OR ANY PARTICIPATING SWIMMER WILL NOT BE PERMITTED OR TOLERATED.
6. I WILL ENJOY INVOLVEMENT WITH THE HEART OF TEXAS AQUATICS TEAM BY SUPPORTING THE SWIMMERS, COACHES AND OTHER PARENTS WITH POSITIVE COMMUNICATION AND ACTIONS.
7. DURING COMPETITIONS, ANY QUESTIONS OR CONCERNS REGARDING DECISIONS MADE BY THE MEET OFFICIALS WILL BE DIRECTED TO A MEMBER OF OUR COACHING STAFF. PARENTS ADDRESS OFFICIALS VIA THE COACHING STAFF ONLY.

SANCTIONS: SHOULD I CONDUCT MYSELF IN SUCH A WAY THAT BRINGS DISCREDIT OR DISCORD TO THE HEART OF TEXAS AQUATICS TEAM, NORTH TEXAS SWIMMING LSC AND/OR USA SWIMMING, I VOLUNTARILY SUBJECT MYSELF TO DISCIPLINARY ACTION. THE HEART OF TEXAS AQUATICS TEAM MAINTAINS THE RIGHT TO TERMINATE ANY MEMBERSHIP WITH/WITHOUT CAUSE IN THE INTEREST OF OUR VISION, MISSION AND OBJECTIVES.

SIGNATURE OF PARENT / GUARDIAN*

DATE

SIGNATURE OF PARENT / GUARDIAN*

DATE

* BOTH PARENTS/GUARDIANS, WHEN APPLICABLE, MUST SIGN THIS FORM.

Heart of Texas Aquatics Team Registration

Name _____ Team _____

Guardians Names if under 18 _____

Mailing Address _____

Phone (home) _____ (cell) _____

Email address _____

TERMS AND CONDITIONS SIGNATURE PAGE

I understand and agree to the aforementioned terms and conditions of the HEAT Swim Club in exchange for the privilege of my registered child/children to participate in the activities and swimming program of the HEAT Swim Club.

Registered Swimmers:

I select to pay by the following options:

_____ Monthly (No discount) Payable each month on the 1st by auto debit

_____ Annually (10% discount payment must be made by September 5)

I agree to give one months notice (in writing to the secretary) and payment of the last month's tuition to terminate membership with HEAT.

CONSENT TO PHOTOGRAPH

_____ I hereby authorize HEAT Swim Club to use photographic images of the above registered swimmer(s) in brochures, print advertising, or on the official HEAT webpage.

_____ I DO NOT authorize HEAT Swim Club to use photographic images of the above registered swimmer(s) in brochures, print advertising or on the official HEAT webpage.

Signature of Parent/Guardian or Master's Swimmer:

_____ Date: _____

Heart of Texas Aquatics Team
HEAT Swim Team
AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED PAYMENTS
(ACH DEBITS)

I (we) do hereby authorize Heart of Texas Aquatics Team, hereinafter referred to as the Originator, to initiate debit entries to the account indicated below, and to initiate corrective reversal entries (credits) to the account indicated below in the event any debit entries are originated in error. I will ensure that funds for payment to HEAT are available by the 5th of each month. Late fees and penalties will still apply.

Name of Depository Financial Institution: _____
Location of Depository Financial Institution: _____
City _____ State _____ Zip _____
Transit/ABA number _____ (nine digits)
Account number _____
_____ Checking _____ Savings

This authority is to remain in effect until the Originator has received my/our written notification of its termination. Notification must be received 30 days in advance to prevent the following month's tuition from billing.

Swimmer's Name _____
Please print clearly
Parent's Name _____
Please print clearly

Signed _____ Date _____
Signed _____ Date _____

Please affix voided or cancelled check— no deposit slips.