

Greetings new and returning Club Sport Valley Vista Swim Team Families,

Enclosed you will find a registration packet for the 2010 summer season. Registration will occur on Tuesday, March 16 from 6:00PM to 9:00 PM at the Sport's Basement in Walnut Creek.

For many this will mark the beginning of another great summer season. For others this will be the beginning of an annual rite of passage. We welcome all of you! We have many traditions at Valley Vista of which we are proud and intend to continue. The level of coaching we offer is second to none. Pre season will begin on April 19th. Head coach Aaron Mikuni will return for his fourth season along with new co-head coach Josh Scott. Josh and Aaron swam together growing up with the Concord Terrapins. Josh went on to swim as a scholarship athlete for Syracuse University and continues to swim at a national level with the Walnut Creek Masters Swim Team. We are extremely fortunate and happy to welcome Josh. Michelle McConnell will be back in the same capacity as last year. She will be overseeing our always strong 7-8's and 6 & unders. Beginning on June 14th we will enjoy the return from UCSB of coaches Mike Zamolo and Anthony Pennisi.

We certainly acknowledge that the success we have enjoyed in the past, league champs 2006 – 2009 / dual meet champs 2007 – 2009 / Walnut Creek City champs 2008 and 2009, is in a large part to the coaches we have been able to have on deck and the improvements they have been able to instill upon our kids. We also recognize that what makes the Valley Vista Swim Team unique is that our swimmers attend seven different schools. Each summer kids and parents reacquaint and/or foster friendships that transcend normal school lines. These ties are maintained as kids advance from elementary to middle and through high school and beyond. Our team is just the right size. We are large enough to field a competitive team, yet small enough to get to know one and other.

On behalf of the Club Sport Valley Vista Board I welcome all of you and look forward to another great 2010 summer season. GO CUDAS!

Steve Stahl
President, Club Sport Valley Vista Swim Team

Swim Team Registration

Registration By Mail:

Please register by mail and save yourself time on registration day.

Registering and paying by mail will allow you to go directly to the parent participation sign up table on registration day.

Your place in line for parent participation will be determined by when your registration was received.

- 1. Complete the attached registration and release form to include all swimmers.**
- 2. Attach checks payable to Valley Vista Swim Team for team fees. No swimmer will be allowed to participate until all fees are paid.**

| <u>Status</u> | <u>Regular Team Fee</u> |
|--|-------------------------|
| Club Member * | \$ 290 per swimmer |
| Age 15 -18 years | \$ 150 per swimmer |
| This fee includes pool usage, coaching, insurance, meet entry fees and trophies. | |

Multiple swimmer discount – first two swimmers are regular team fee, third swimmer is \$150 regardless of age, and 4th swimmer is free. Any fee questions please call Michelle Sharpes at (925) 296-0450.

There are no refunds after May 14th.

- 3. Attach checks for:**
 - Responsibility Deposit - \$100.00**(This needs to be a separate check)
This will be torn up or returned upon request after parent participation requirements are completed at the end of the season.
 - Snack Bar Buy Out - \$30.00**(This may be included with registration)

- 4. Mail registration form with fees to:**
 - Michelle Sharpes**
 - 175 Pine Creek Road**
 - Walnut Creek, CA 94598**

- 5. Attend registration day at Sports Basement on Tuesday, March 16th, 6 pm – 9 pm.**

Please note registration is off site. Sports Basement is located at 1881 Ygnacio Valley Rd in Walnut Creek (across from Heather Farms).

- Sign-up for swim meet parent participation (**bring your calendar**).
- Swim Orders - swimmers can be sized for swim suits and order t-shirts, sweatshirts and caps.
- New swimmer evaluations will be held on Sunday, March 14th from 9:00 am until 12:00 at ClubSport Valley Vista Pool. Get your child evaluated for swim team or for our Cudas swim program on this day.

- 6. Swim Team Parent Contract**

New this year – Returning families who have signed up for all jobs and return this contract do not need to attend parent meeting on May 13. If you do not return the form your child will not be registered for swim team.

- 7. Attend New Parent Meeting on Thursday, May 13th at 7:00 pm** – This meeting is mandatory for all new members to Valley Vista Swim Team. Returning families who have not signed up for all their jobs are required to come and do so. Suits and apparel will also need to be picked up at this time.

ClubSport Valley Vista Membership

Please call Jim Meese at ClubSport if you have questions regarding membership at 934-4050. Swim team can not answer questions regarding club membership.

Parent Participation:

It takes willing parents to run a swim team. Therefore, **each family is required to sign-up for and work parent participation jobs to help run the meets. Parent participation applies to our regular dual meets. In addition to those job credits there are weekend invitational meets, and league/county championship meets that you will have to participate in.**

* 15 - 18 swimmers and their parents do not have parent participation responsibilities; however they are required to make the snack donations.

* **All Families will be assigned separate parent participation roles for Invitational Meets, City Meet and League Meet.**

Communication:

You may also access up to date information on the team at our website: <http://www.vvst.com>. Please also check the bulletin board on the deck for additional information.

Schedule:

Refer to www.VVST.com for the schedule. The greatest reward comes with working toward a goal. The swim team commitment includes:

1. 5-day/week practices
2. Home and away swim meets with one other team
3. Participation in **Invitational Swim Meets**

Family vacations are great - however, you will always be missed. Please make every attempt to schedule your Vacation around **Walnut Creek City Meet (July 10 & 11) and League Meet (July 13 & August 1)**. These meets count **every** swimmer for scores.

| | | |
|---------------------------|--|---|
| Dates to remember: | <u>Registration Day</u> | <u>Tuesday, March 16th 6:00 pm</u> |
| | <u>Cuda/Swim Evaluation</u> | <u>Sunday, March 14th 9:00 am to noon</u> |
| | <u>Cuda Program Starts</u> | <u>Monday, April 12th</u> |
| | <u>Pre Season workout begins</u> | <u>Monday, April 19th</u> |
| | <u>Mandatory New Parent Meeting</u> | <u>Thursday, May 13th 7:00 pm</u> |
| | <u>Time Trials</u> | <u>Sunday, May 16th at 10:00 am</u> |

Swim Team Questions? Call Michelle Sharpes at (925)296-0450 or email mdsharpes@aol.com
Cuda Swim Program? Call BJ Henry at (925) 788-1008 or email at bjmaryus@astound.net

Please feel free to call or email with any questions!!

ClubSport Valley Vista Swim Team
Registration and Release Form

Last Name: _____

(Age as of June 15th)

First Name/s: _____ M / F Birthdate: _____ Age: _____ Amt: \$ _____

_____ M / F Birthdate: _____ Age: _____ Amt: \$ _____

_____ M / F Birthdate: _____ Age: _____ Amt: \$ _____

Snack Bar Buy Out: _____ Amt: \$ 30.00

Voluntary Contribution (to defray budget costs including coaches' salaries and benefits) Amt: \$ _____

VVST is a 501 © (3) non-profit organization. Your donation is tax deductible. Tax ID # 56-2470433

Total: \$ _____

Address: _____

Parent's Name: _____ Home Phone: _____

Work Phone: _____

Cell Phone: _____

Parent's Name: _____ Home Phone: _____

Work Phone: _____

Cell Phone: _____

Family E-Mail: _____

Physician's Name: _____ Phone: _____

Insurance Company: _____ Policy #: _____

I am the undersigned parent or guardian of the above named child/children. I understand that ClubSport Valley Vista Swim Team is a non-profit, volunteer youth sports program, and I agree to hold the organization, coaches, associates, and agents harmless from any and all injuries which may be incurred by my child/children while attending any swim team function. I authorize a designated agent of ClubSport Valley Vista Swim Team to seek medical attention on behalf of my child/children as may be deemed necessary. I hereby give permission for my child/children to attend all swim team activities. Additionally, I agree to hold the owners, agents and employees of the Club, or not included, harmless from any or all injuries, which may be incurred by my child/children while attending any swim team activity.

I understand that each family is required to perform **parent participation roles throughout the season** and that number may change based on final enrollment. In addition, **each family will work City Meet, League Meet and any Invitational in which my child participates.**

I agree to be bound by all the rules and policies of the ClubSport Valley Vista Swim Team and the organization of which it is a member.

Signature of Parent or Guardian

Date

ClubSport Valley Vista Member? Yes / No Membership#: _____
(Child must be a member in good standing of ClubSport to answer this question yes)

.....
(Office use only)

Number of swimmers under 15 years old: _____

Number of swimmers 15 and over: _____

Amount due: _____ Amount paid: _____ Check #: _____

\$100 parent participation deposit: Yes / No

\$30 Snack Bar Buyout: Yes / No

Only past swim team families may pre-register for Cudas via mail – all others please bring form to pool on day of evaluation. Thank you.

Cuda Program Registration and Release Form

The Cuda Program is a program to develop young swimmers over a five-week period. The children are put in small groups by ability and progress through swim skills according to that ability. At the end of the 5 weeks, most of the kids can move to the swim team safely. The Cuda program will run from Monday, April 12th through Friday May 14th. There will be two sessions offered: 3:30 p.m. to 3:55 p.m. and 4:05 to 4:30 p.m. Priority is given to siblings of swim team members and from there it is on a first come first serve basis. Time slots will be filled by the directors based on safety of numbers and ratios. We will not be able to accommodate preference.

Your child will be evaluated and, based on each child’s ability; a recommendation on whether Cudas is appropriate will be made. Your swimmer needs to be able to dog paddle or get a breath unassisted to be ready for Cudas. Swim evaluations will be done on **Sunday, March 14th from 9:00 am until 12:00 at ClubSport Valley Vista pool. Every swimmer for the Cudas program must be evaluated.**

\$200 per swimmer

If you are interested in signing up your child/children, please complete the following form and bring it with you along with payment to the swim evaluation on March 14th from 9:00 am until noon at the ClubSport Valley Vista Pool. If the balance of Cudas is not paid in full by the first day your spot will be surrendered. All Cudas who graduate receive a \$50 credit toward swim team.

For any questions, call BJ Henry at (925) 788-1008 or email bjmaryus@astound.net.

Last Name: _____

First Name/s: _____ **M / F Birthdate:** _____ **Age:** _____

_____ **M / F Birthdate:** _____ **Age:** _____

_____ **M / F Birthdate:** _____ **Age:** _____

Address: _____

Parent’s Name: _____ **Home Phone:** _____

Email address: _____ **Work Phone:** _____

Parent’s Name: _____ **Home Phone:** _____

Email address: _____ **Work Phone:** _____

Physician’s Name: _____ **Phone:** _____

Insurance Company: _____ **Policy #:** _____

I am the undersigned parent or guardian of the above named child/children. I understand that ClubSport Valley Vista Swim Team is a non-profit, volunteer youth sports program, and I agree to hold the organization, coaches, associates, and agents harmless from any and all injuries which may be incurred by my child/children while attending any swim team function. I authorize a designated agent of ClubSport Valley Vista Swim Team to seek medical attention on behalf of my child/children as may be deemed necessary. I hereby give permission for my child/children to attend all swim team activities. Additionally, I agree to hold the owners, agents and employees of the Club, or not included, harmless from any or all injuries, which may be incurred by my child/children while attending any swim team activity.

I agree to be bound by all the rules and policies of the ClubSport Valley Vista Swim Team and the organization of which it is a member.

Signature of Parent or Guardian

Date

ClubSport Valley Vista Member? Yes / No **Membership#:** _____

.....
(Office use only)

Number of swimmers: _____

Swimming Ability _____

Amount Due: _____ **Amount paid:** _____ **Check #:** _____

ClubSport Valley Vista Swim Team Parents Contract

1. I understand my child/children will not be allowed to participate in any practices or meets unless my registration, job deposit, and snack bar buyouts are paid in full.
2. I understand my child will not be able to attend swim practice unless my account with ClubSport Valley Vista is current.
3. I understand my family is responsible for working 8 jobs at **dual meets or activities functions** (# may be adjusted up or down by the VVST board of directors) and 2-3 **invitational** jobs during the summer season. I understand that in the event I am unable to fulfill a job I am signed up for I will find a **suitable** replacement **capable** of performing the job. I understand my job deposit will be forfeited if I or my replacement have not checked in 20 minutes prior to the start of the meet and am not positioned at my job site 15 minutes prior to the start of the meet. Finally, I understand my job deposit will be forfeited if I have failed to complete the required number of jobs by the end of the season. I understand my child/children will not be allowed to swim in another meet in the event I forfeit a job deposit until the job deposit check is replaced.
4. I will make every effort to insure my family participates in the Walnut Creek City Meet and the year end Contra Costa Valley Swim Conference League Meet. All eligible swimmers will be entered into these two meets. I understand I will be asked to work one of these meets (see invitationals above).
5. Before my family leaves a swim meet I will check with the relay board to see if my child is assigned to a relay.
6. A critical part of the coaches planning for each meet is to know which swimmers will not be available. I will sign out of dual meets at least 1 week in advance and 3 weeks in advance of Invitationals (entries are due 2 ½ weeks prior). I will reimburse the team for any no-shows, typically about \$15.00 per swimmer.
7. I understand that issues regarding meet entries, relay selection, and practice issues should be directed to the Director of Swimming (Marienella Blake) and **not the coaches**.
8. I will refrain from coaching my child while they are participating in a coached practice or during a team warm up. Furthermore, I will refrain from interrupting the coaches while they are conducting a practice or warm up.
9. I understand we are all members of ClubSport Valley Vista and will honor the club's rules and regulations. Children under 13 must be directly supervised by a parent or authorized adult at all times while at the club.
10. I understand, as parents, we are all expected to conduct ourselves in a professional manner and to maintain a decorum which fosters the positive atmosphere intended for youth swim team competition. The same holds true when dealing with coaches, meet officials, and swimmers/parents from other teams. Any adult found verbally abusing or berating a swimmer (including family members), coach, or meet official, or otherwise displaying improper conduct which is deemed detrimental to a swimmer, the team, or ClubSport Valley Vista will be asked to leave the pool area and may be subject to expulsion from all future team meets and activities.

I have read the above Parent Contract and agree to abide by these standards of behavior. My signature obliges any other parent or authorized adult responsible for my children to the above rules as well.

Authorized Adults Signature: _____ Date: _____

Authorized Adults Signature: _____ Date: _____

Printed Name: _____ Printed Name: _____

Child/Children _____