



**EVERGREEN HURRICANES SWIM TEAM
2010 -2011 TEAM MEMBERSHIP AGREEMENT**

Please indicate agreement with the following statements by initialing each statement:

_____ We understand that if our swimmer leaves the team, we forfeit all registration fees and any monthly dues that we have paid.

_____ We understand that if our swimmer intends to take a leave of absence from the team during the 2010-2011 season, we must give written notice to the treasurer by the 25th of the preceding month in order to be exempt from dues for the month the swimmer will be absent. *If a swimmer is in the water for any portion of the month, we are responsible for paying the dues for the entire month.*

_____ We have read and understand the information regarding our obligation to volunteer and agree to to work at each swim meet hosted by the team, and to participate in team management through assisting with a volunteer job.

_____ We understand that we are responsible for finding a replacement to fulfill our worker session at a swim meet, and to notify the volunteer coordinator. If we do not show up or find a substitute, we understand that we will be charged a \$50 fee per missed session. This fee will be charged to the credit card number I provide.

_____ Full payment of account balances is due on or before the 15th of the month. There will be a \$25 late fee for any payment received after the 15th of the month.

_____ We understand that there will be a \$25 fee for any checks returned for insufficient funds.

_____ Members with balances over 30 days past due will not be permitted to practice or participate in meets until the account is paid in full. Members with accounts over sixty days past due will be considered in violation of the membership agreement. They may rejoin the team once the balance, plus a \$25 fee for reactivating their membership, is paid in full.

_____ Should a swimmer develop a medical condition that would prohibit his/her participation, the team will prorate or suspend the swimmer's monthly dues once documentation is provided from a physician.

_____ A swimmer who wishes to leave the program must notify the treasurer in writing (by email is permissible) by the 25th of the month preceding their resignation in order to avoid being billed for the next month. Verbal notice to the coach or treasurer is not sufficient. If a member is billed unnecessarily and cannot provide proof of their written notification of resignation, they are responsible for paying all charges as billed.

We have read and understood the Evergreen Hurricanes Swim Team Membership Agreement. We understand that, as a parent/guardian of a Hurricanes Swimmer, we have a financial obligation to pay the annual fees and monthly dues as outlined in the explanation of fees, in full and on time.

Signature: _____

Date: _____