

2011 Swim & Dive Team Registration Form

Returning swimmers & divers may register by mail using this form.

First-time swimmers & divers, please register at the Swim/Dive Sign-Up Meeting on Friday, June 3rd from 4:00 to 6:00 pm. You WILL be asked to get in the water!

Meet the Coaches Day will follow the first practice on Saturday, June 4th, beginning at 11:00 am.

Swim/Dive Team Service Requirement – We have 5 home meets this summer including Ridgewood Relays.

All Families must work at least 3 home meets shifts or pay a \$125 participation fee.

(For shorter meets, shifts may be the entire meet and for longer meets may be half-meet shifts.)

Working Ridgewood Relays counts toward your general Member Service Requirement, not toward this Swim/Dive Service Requirement. Job sign-up will be online this year – the first opportunity to sign-up will be March 23rd at our Annual Stockholder Meeting – jobs are filled on a first-come, first-served basis. The participation fee rule will be enforced – **BUT WE'D RATHER HAVE YOUR HELP!!** Volunteers must check in at the Volunteer Registration Desk on the day of the meet to get credit. Only Dive Team families may sign up to work Dive Meets, and all Dive Team families must work at least one Dive Meet.

Fees for the 2011 Swim/Dive Season:

Swim Team (per child)	\$140/\$135*	Dive Team (per child)	\$140/\$135*
Both Teams (per child)	\$140/\$135*	Family Maximum	\$330/\$320*

* - lower rate includes discount for cash or check payment

Parent Name _____ Email _____

Child's Name	Birthdate	Swim/Dive/Both?	T-Shirt Size	Fee
				\$
				\$
				\$
				\$
				\$

T-Shirt sizes: Youth M, Youth L, Adult S, Adult M, Adult L or Adult XL

SUBTOTAL \$ _____

Swim/Dive Service Requirement Fee (\$125 in lieu of signing up for jobs) \$ _____

TOTAL FEES (transfer this amount to 2011 Pool Membership Registration form) \$ _____



I understand that the Swim/Dive Team Service Requirement is a condition of my child/children's participation on Swim or Dive Team, and if I do not fulfill it agree to pay the Service Requirement Fee after the season.

Parent Signature: _____ Date: _____

NOTE: You must also complete the reverse side of this form – it is a waiver that **must** be signed for any swimmer or diver to compete in swim/dive meets. This is a requirement by Madison All-City Swim/Dive League, Inc. for all participants on swim and dive teams. Swimmers and divers will not be permitted to take part in meets unless this waiver is on file.

**RELEASE AND WAIVER OF LIABILITY,
ASSUMPTION OF RISK AND INDEMNITY AGREEMENT**

IN CONSIDERATION of access to and use of the facilities of the member pools and their respective legal owners (Hawks Landing Pool, High Point Pool, Hill Farm Pool, Maple Bluff Country Club, Middleton Swim Club, Monona Swim Club, Nakoma Country Club, Parkcrest Pool, Ridgewood Pool, Seminole Pool, Shorewood Pool, and West Side Pool, collectively referred to as the "Hosts") of the All-City Swim/Dive League, Inc. (the "League") for use in events by the Hosts and the League, THE UNDERSIGNED, in his/her individual capacity as well as parent or guardian of the below listed minor child/children (the "Children"), for himself/herself, his or her personal representatives, heirs, and next of kin:

1. HEREBY WARRANTS AND REPRESENTS that: (i) he or she understands that the particular activities which the Children may undertake at the Facilities may involve vigorous physical exercise, including by way of example swimming, diving, exercise, and prolonged or peak physical activity, as well as use of recreational equipment or other devices located at the Facilities (collectively, the "Activities"); (ii) he or she understands that there are significant risks associated with participation in the Activities, including by way of example the possibility of serious injury or death caused by falling, exertion, physical activity, drowning, accident, injury related to use of equipment or devices, or injury caused by or inflicted by the acts or negligence of other participants; and (iii) the Children are in sufficient physical condition and are physically able to undertake all Activities, and have no disability, impairment or ailment preventing him or her from active or passive exercise, or that will be detrimental to his or her health, safety, comfort or condition if he or she does so engage or participate.

_____ [initial]

2. HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the League, its directors, officers, agents and employees (the "Releasees") FROM ALL LIABILITY, TO THE CHILDREN AND THE UNDERSIGNED, their personal representatives, assigns, heirs, and next of kin FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFOR ON ACCOUNT OF INJURY TO THE PERSON OR PROPERTY OR RESULTING IN DEATH OF THE CHILDREN ARISING OUT OF OR RELATED TO THE ACTIVITIES OCCURRING WHILE AT THE FACILITIES, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE (BUT NOT INCLUDING INTENTIONAL OR RECKLESS ACTS OF THE RELEASEES).

_____ [initial]

3. HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releasees and each of them FROM ANY LOSS, LIABILITY, DAMAGE, OR COST the Children or the Undersigned may incur arising out of or related to THE ACTIVITIES WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE (BUT NOT INCLUDING INTENTIONAL OR RECKLESS ACTS OF THE RELEASEES).

_____ [initial]

4. HEREBY ACCEPTS THE RISK AND ASSUMES FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE TO THE CHILDREN arising out of or related to THE ACTIVITIES whether caused by the NEGLIGENCE OF RELEASEES or otherwise (BUT NOT INCLUDING INTENTIONAL OR RECKLESS ACTS OF THE RELEASEES), and furthermore acknowledges, pursuant to the recreational activities statute, Wis. Stat. § 895.525, that the Children have a responsibility to act within the limits of his or her ability, to heed all warnings regarding participation in the recreational activity, to maintain control of his or her person and any applicable equipment or devices, and to refrain from acting in any manner that may cause or contribute to death or injury for himself or herself or to other persons.

_____ [initial]

5. HEREBY acknowledges that prior to signing this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement, the Undersigned has had the opportunity to contact a representative of the League to discuss and/or bargain regarding any of the terms set forth herein.

_____ [initial]

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Full Name and Birthdate of Child/Children Covered by this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement:

- | | |
|---------------|-----------------------|
| 1. Name _____ | Birthdate ___/___/___ |
| 2. Name _____ | Birthdate ___/___/___ |
| 3. Name _____ | Birthdate ___/___/___ |
| 4. Name _____ | Birthdate ___/___/___ |
| 5. Name _____ | Birthdate ___/___/___ |

Signature of Parent or Guardian

Date

2011 Starts & Turns Development Clinic Waiver:

I, the undersigned, hereby acknowledge that I am familiar with the risks and dangers inherent in the activity of competitive swimming and related training. I hereby grant permission for my child/ward to participate in the Starts & Turns Development Clinic. I agree to hold Ridgewood Pool, its officers, agents and employees, both individually and in official capacity, harmless from any liability for injury or damage to person or property as a result of my child/ward's participation in this activity. I hereby agree that the person supervising the activity may, without further permission, take whatever steps he or she deems necessary in case of injury, including obtaining emergency medical or dental care, and to hold Ridgewood Pool, its officers, agents and employees harmless from liability in connection therewith as above specified.

Parent/Legal Guardian Signature

Date _____

2011 Ridgewood Pool Starts & Turns Development Clinic

May 31st, June 1st and 2nd – 3 Sessions
Tuesday, Wednesday & Thursday

9-10 year olds 5:00-6:00pm

11-14's 6:05-7:05pm

*** Swim Team Experience required ***

Ridgewood's successful Swim Team Staff will conduct a one-week Starts & Turns Clinic the week before swim team starts. This clinic will review techniques, and improve proficiency of two critical parts of each race – starts and turns for all strokes. It's a great way to get ready for the summer swim season!

Only \$15.00 for Ridgewood Members, \$25.00 for Non-Ridgewood Members

Clinic will be held in inclement weather. No refunds or makeup for weather related cancellations.
Maximum number of participants: 40 swimmers/session.

**Please fill out form below and enclose with your membership registration.
Additional forms for non-Ridgewood members are available on request.**

2011 Starts & Turns Development Clinic enrollment form (include with registration materials and fee payment):

Swimmer(s):

Circle Session Time

Name _____ Age _____ Session 5:00 or 6:05

Name _____ Age _____ Session 5:00 or 6:05

Name _____ Age _____ Session 5:00 or 6:05

Address _____

Ridgewood Member _____ yes, \$15.00 per swimmer _____ no, \$25.00 per swimmer

Total enclosed for Starts & Turns Development Clinic \$ _____

Please also sign waiver on the back of this form.

Questions? Please contact Michele Hughes 271-5324

2011 Stockholder Ballot

The Ridgewood Pool Board of Directors has three openings for the coming season. Positions served by any one member may change during his or her term. Board members serve a term of three (3) years. The new term begins May 1, 2011. Anyone interested in serving on the Board should contact a current board member. Following are brief statements prepared by each candidate:

Please vote for three (3) of the following candidates for the Board. Indicate your choice by checking the appropriate blank.

- JON SILVERWOOD** - I am a father of two that returned back to the town I grew up in. It's been an amazing experience, watching my girls enjoy the same experiences at Ridgewood that I did as a youngster. The pool provides such a great place for families to interact, relax and enjoy the summer. I would be honored to help continue that Ridgewood tradition.
- AMY FEINSTEIN** - My family has been proud Ridgewood members for the past 7 years, and my daughter has participated on swim team every year. We live in Orchard Ridge, and I have over 4 years of experience providing leadership to swimming organizations. I joined the Board three years ago with an interest in helping RW stabilize financially, implement a strategy for growth, and strengthen its value proposition. Over the course of my term, I implemented Ridgewood Relays, migrated the membership from paper to electronic work shift sign up system (Volunteerspot.com), and have conducted the necessary diligence to enable RW to implement a membership verification system at a future date. I currently serve as your Vice President, and am seeking an additional term to continue in the role of Vice President and to implement the new role of Volunteer Coordinator.
- SCOTT STEWART** - My wife Laura and I live in Madison and have enjoyed the past six years as members of Ridgewood Pool. Our children - Ryan (11) and Sara (9) are both actively involved with the swim team, water ballet and developing last memories each summer at Ridgewood. For the last three years I have enjoyed my service as the Treasurer on the Ridgewood Board. Along with the other members on the board, our focus is maintain the special culture that Ridgewood offers its members, for years to come. I look forward to your support in allowing me to continue my service on the Ridgewood Board.

WRITE IN CANDIDATE - _____

I understand that only stockholding members of Ridgewood Pool may vote for board members, and that each stockholding family is entitled to one (1) vote. By completing this ballot, I affirm that I am a stockholder.

NAME (please print) _____

SIGNATURE _____

DATE _____

Please enclose this ballot with membership registration.



2011 Ridgewood Pool Membership Registration Form

Required Member Information:

Name (both Parents if Applicable) _____ Phone _____

Address _____ City, Zip _____

Email _____

Required Membership Dues and Fees:

Please write the correct amount in the right-hand column, and Add/Subtract to calculate your Summer 2011 total. (The price on left is Full Price (Credit Card), the price on right* is the Cash/Check discount price.)

Fee Category	Full Price/Cash-Check Price	Write Correct Amount
CURRENT STOCKHOLDERS (or Purchasing Stock Below). <i>Choose one of the Following Four:</i>		
Family Plus or Family Plus Team Membership Dues	\$615/\$595*	\$
Family Rec Membership Dues	\$545/\$525*	\$
Couple Membership Dues	\$340/\$325*	\$
Individual Membership Dues	\$260/\$250*	\$
2010 SUMMER NON-STOCK MEMBER DISCOUNT — Must Own or Buy Stock or Installment Plan (Discount also applies for 2009 Summer Non-Stock Members who did not buy stock in 2010.) <i>Choose One of the Following Three:</i>		
I wish to purchase Ridgewood Pool Stock (full payment)	\$550	\$
I wish to make my ___1 st , ___2 nd or ___3 rd Stock Installment payment	\$200	\$
I have already purchased Ridgewood Pool Stock	\$0	\$
SWIM/DIVE TEAM FEES (Transfer amount calculated on Swim/Dive Team form)		
STROKE CLINIC REGISTRATION FEES (Transfer amount from Stroke Clinic form)		
2011 NON-STOCK SUMMER MEMBERSHIP — New Members only (to be eligible you may not have ever owned RW Stock or previously purchased a Non-Stock Summer Membership)	\$410/\$395*	\$
DONATION — I wish to donate this amount to Ridgewood for this purpose: ___ Swim Team ___ Dive Team ___ Bldg & Grounds ___ Best Use	Donation	\$
TOTAL OF ALL FEES		\$
PAYMENT - CHECK ONE: ___ A check payable to "Ridgewood Pool Inc. is enclosed ___ I will pay via Credit Card at www.ridgewoodpool.com		

Required Membership Signature: I understand that I am obligated to meet the Member Service Requirement described in the 2011 Green Book, and if I do not I agree that I will pay the \$50 Member Obligation Fee when billed after the 2011 Season.

Signed: _____ Date: _____

Please send all forms and pay all fees by May 1, 1011:
Ridgewood Pool Membership
 c/o Becky Jenn
 5117 Flad Avenue
 Madison, WI 53711

Upon receipt of fee payment your complimentary Guest Passes will be issued and made available for pick-up at the pool.

If you were Referred by another member, please write the family's name (one name only please) — _____

You must fill out Emergency Medical Treatment Release Form for all children younger than 18.

Ridgewood Pool, Inc.

2011 EMERGENCY MEDICAL TREATMENT RELEASE FORM

Each family must return this form before access to the Pool will be allowed.

Family Last Name: _____ Home Phone: _____

Parent/Guardian First Names: _____ and _____

Daytime/Work/Cell Phones: _____ and _____

Places of Employment: _____ and _____

Name of Child	Birthdate	Relationship	Medical allergies, chronic illnesses/other conditions
_____	___/___/____	_____	_____
_____	___/___/____	_____	_____
_____	___/___/____	_____	_____
_____	___/___/____	_____	_____
_____	___/___/____	_____	_____
_____	___/___/____	_____	_____

Parent/Legal Guardian signature required _____ **Date** _____

By completing and signing this form, I authorize the treatment, by a licensed physician, of the above minor(s) in the event of any medical emergency which, in the opinion of the attending physician, may endanger the minor's life, or cause disfigurement, physical impairment, or undue discomfort if delayed. The authority is granted if the injury is threatening or after a reasonable effort has been made to reach a parent or guardian listed above.

Physician's Name: _____ Phone: _____

Clinic/Group: _____

Other contact, in case parent/guardian cannot be reached:

Name: _____ Phone: _____