



## **FEES AND BILLING**

### **Annual Booster Club Membership Fees**

non-refundable members joining on or before June 30 <sup>th</sup> -	<b>\$200.00</b>
members joining July 1 <sup>st</sup> thru December 31 <sup>st</sup> -	<b>\$100.00</b>
annual renewal fee due January 1 <sup>st</sup> -	<b>\$200.00</b>
one membership per family for one calendar year starting January 1 thru December 31 <sup>st</sup> separate invoice mailed directly from Booster Club - <i>checks made out to McCormick Boosters</i>	

### **Annual National Governing Body Registration**

#### **US Diving**

NOVICE (Competitive Blue) -	<b>\$20.00</b>
JUNIOR/SENIOR OLYMPIC (Competitive Gold) -	<b>\$75.00</b>
Register online for US Diving at <a href="http://www.usadiving.org">www.usadiving.org</a>	
Choose: "Southern Pacific" for Local Diving Association on drop down menu	
Choose: "McCormick Divers" on drop down menu	

#### **Amateur Athletic Union (AAU)**

YOUTH (Ages 4 - 20) NOVICE and JUNIOR OLYMPIC -	<b>\$14.00</b>
ADULT (21 & Over) SENIOR / MASTER -	<b>\$22.00</b>
Register online for AAU at <a href="http://www.ausports.org">www.ausports.org</a>	
Choose: Join AAU; Click on "Register as Athlete"	
Choose: Youth Program; \$14 membership fee: DI – Diving for sport, and search McCormick Divers for AAU club name (ask Coaching Staff for Club Code as this changes every year)	

### **Monthly Class Fees Payable To McCormick Divers**

Beginner (Lessons)	2 days/week (Tues & Thurs) 1 hrs. each	<b>\$165.00</b>
Intermediate 1 (Novice)	2 days/week (M, W, or Th) 1 ½ hrs. each	<b>\$215.00</b>
Intermediate 2	3 days/week (M, W & Th) 2 hrs. each	<b>\$295.00</b>
Advanced (JO)	4-5 days/week (M, T, W, F, Sat) 2 ½ -3 hrs. each	<b>\$325.00</b>
Elite (JO & SR)	Coming soon	TBD

- Initial payment of first and last month fees required at registration payable to McCormick Divers

- Termination of lessons requires a notice of 30 days

- monthly fees due on the 1<sup>st</sup> payable by the 10<sup>th</sup> with a late fee of \$15 added on the 11<sup>th</sup> appearing on the next month's invoice
- invoices mailed or emailed on or before the 25<sup>th</sup> day of the preceding month
- injured athletes are expected to pay at least half of their monthly fee to keep their spot on the roster for the team
- makeup's are related to the number of days the diver is signed up for the month, i.e. diver signs for 2 days and gets 2 days makeup / month



## REGISTRATION FORM

PLEASE COMPLETE THE FOLLOWING INFORMATION:

DIVER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ GRADE: \_\_\_\_\_

D.O.B.: \_\_\_\_\_

PARENT'S FIRST NAMES: \_\_\_\_\_

BILLING ADDRESS (if different from above): \_\_\_\_\_

SPORTS / HOBBIES: \_\_\_\_\_

SPECIAL NEEDS THAT COACHES NEED TO BE AWARE OF: \_\_\_\_\_

GOALS FOR MEMBERSHIP IN McCORMICK DIVERS: \_\_\_\_\_

### TEAM MEMBERSHIP AGREEMENT

Divers Name (please print): \_\_\_\_\_

Effective date: \_\_\_\_\_

Team membership is an **ANNUAL** commitment to be paid in twelve monthly installments, due the 1<sup>st</sup> of each month. If a diver is unable to attend workouts, the installment is still due in order to retain full team status.

Fees are due on the 1<sup>st</sup> of the month payable by 10<sup>th</sup> with a \$15 late fee added on the 11<sup>th</sup> of the month. The diver will not be permitted to train after the 15<sup>th</sup> of the month if dues or fees are delinquent.



For those divers temporarily absent for as long as three months, an inactive fee will be granted only upon director approval. This fee will be ½ of the regular monthly dues and the diver will be able to rejoin the team.

If installments are not kept current, a diver will be suspended from the team and may not rejoin until all delinquent charges are paid along with a \$50 re-registration fee.

It takes all of us working together to help our children and coaches realize their potential. To this end I agree to the terms of this team membership agreement.

Date: \_\_\_\_\_ Parent / Guardian: \_\_\_\_\_

## **RULES AND REGULATIONS**

1. Team membership is at the discretion of the Coaching Staff. The staff has full power to accept or reject the application of any person for membership.
2. All scheduled practices and meets must be attended unless arrangements are made in advance with the Coaching Staff. Continual lack of attendance may result in suspension from the team.
3. Team suits are required to be worn at all meets. Team equipment is available from McCormick Divers / CAS. CAS Competitive Aquatic Supply, [www.casswimshop.com](http://www.casswimshop.com), Choose: Team Gear / McCormick
4. Parents and friends are not allowed on the pool deck during workouts without the coaches' permission.
5. Transportation to local meets is the responsibility of the diver / parent.

Diver's Signature: \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_

*We have read and discussed the above Rules and Regulations and agree to follow all the terms contained therein.*

## **CODE OF CONDUCT**

The McCormick Divers Code of Conduct is designed to keep divers safe and to promote a favorable image of McCormick Divers.

The code of conduct reflects a commitment to academic achievement at school, athletic achievement at the pool, and citizenship in the community.

Each athlete participating in training and competitions with the McCormick Divers must comply with the guidelines below. The Head Coach, and the Coaching Staff, as needed, may establish additional guidelines.

Team Membership is at the discretion of the Head Coach and the Coaching staff.



### **General Behavior**

1. McCormick Divers will maintain high standards of moral and ethical behavior, which includes self control, responsible behavior, and consideration for others physical and emotional well being, courtesy, good manners and sportsmanship at all times.
2. The transportation, possession or use of alcohol, tobacco products or illegal drugs by any McCormick Dive team member is prohibited. Any suspected use of drugs or alcohol by any team member will be grounds for drug or alcohol testing.
3. McCormick Divers will display proper respect and sportsmanship toward coaches, officials, administrators, competitors, teammates and the public to include both their person and their property. 4. Illegal, inappropriate behavior and inappropriate language reflecting negatively on the McCormick Divers will not be tolerated.

### **Academic Behavior**

1. McCormick Divers must maintain a satisfactory standard of academic achievement throughout the year.
2. McCormick Divers Coaching Staff will support the corrective action outlined by all schools pertaining to academic achievement. This could result in suspension from the team.

### **Travel Behavior**

1. No athlete will travel when ill or injured, which is evident to the parents or Coaching Staff.
2. Curfews established by the staff will be adhered to each day.
3. Unless otherwise excused or instructed by Coaching Staff, participants in a team trip will attend all team functions (on time), to include meetings, practices and any other team-sanctioned event.
4. There will be no male athletes in female athlete's rooms and no female athletes in male athlete's rooms.
5. One parent must accompany his / her diver, if the diver is under the age of 18.
6. Each diver must report their whereabouts directly to their parent or coach at all times.
7. Parents must provide transportation to / from all meets. Coaches will not provide transportation to / from any meet (unless in the case of an emergency).
8. Additional guidelines may come from the staff as needed. 9. Failure to comply with these guidelines may cause the diver to be sent home at the diver's expense.

### **Practice / Training Behavior**

1. No athlete will practice when any illness or injury, is evident to the parents or Coaching Staff.
2. Practice times will be established by the staff and will be adhered to each day.
3. Each diver must report their whereabouts directly to their parent or Coaching Staff at all times.
4. Parents must provide transportation to / from all practices. Coaching Staff will not provide transportation to / from any practice (unless in the case of an emergency).
5. All Divers must dress and undress in the locker rooms (not by the pool with towels wrapped around them).
6. Additional guidelines may come from the Coaching Staff as needed.
7. If any failure to comply with these guidelines occurs during a practice the diver may be sent home.

## **HARASSMENT POLICY**

### **General**

A central philosophy of the McCormick Diver is respect for divers and coaches. It is our goal to provide an environment that is free of hostility, intimidation and harassment of any kind and to encourage divers to develop respect for themselves and for others. In keeping with these goals, the McCormick Divers have developed a policy against harassment of any kind.



**Policy**

The McCormick Diver Club strictly prohibits, and will not tolerate, harassment of any kind by any diver or coach. This policy prohibits harassment in any form, including sexual harassment. Sexual harassment includes, but is not limited to unwelcome advances, requests for sexual favors, or other verbal, physical conduct, or written communication of an intimidating, hostile or offensive nature.

Any diver who is determined to have engaged in harassing conduct is subject to discipline, up to and including revocation of his or her membership in the McCormick Divers Club. Any employee or coach who is determined to have engaged in harassing conduct is subject to discipline, up to and including immediate termination.

**Procedure**

1. Any diver who believes that he or she is being harassed should immediately report the offensive conduct to his or her coach.
2. Any coach or other employee who feels that he or she is being harassed should immediately report the offensive conduct either to his or her immediate superior or a member of the board.
3. Within 24 hours of receiving a report of harassment, a coach should notify a board member, preferably the president of the board, of the reported incident.
4. The coach and / or the board shall promptly investigate any reports of harassment. If the reported harassment involves conduct by a diver against another diver, the parents or guardians of both shall be informed, as quickly as possible, but in no event less than 48 hours, after the coach and / or the board member is informed of the offensive conduct. If possible, and within the coach's discretion, the diver shall be separated during practice until the investigation of the alleged conduct is complete.

**Team Equipment / Team Suits**

1. Any diver who participates on the McCormick Divers Team is required to wear and compete in the team-approved suits. Any diver who participates on the McCormick Divers Team is required to wear team warm-ups, t-shirts, or parkas on the awards stands. CAS Competitive Aquatic Supply, [www.casswimshop.com](http://www.casswimshop.com), Choose: Team Gear / McCormick

**Code of Conduct Enforcement**

1. Any diver not adhering to the Code of Conduct is subject to appropriate action by the Coaching Staff.
2. Violations of the Code of Conduct by any diver may be subject to the following: 1<sup>st</sup> time offence – 15 day suspension from the team 2<sup>nd</sup> time offense – 30 day suspension from the team 3<sup>rd</sup> time offense – termination from the team. 3. Appeals to the above actions must be made in writing to the head coach within ten days of the noted action.

*I have reviewed the above Code of Conduct, and agree to abide by the code that has been written. I agree to represent the team and promote a favorable image of McCormick Divers.*

\_\_\_\_\_/\_\_\_\_\_  
Diver Signature / Date

\_\_\_\_\_/\_\_\_\_\_  
Parent Signature / Date

Debby McCormick, Charly Collins  
Coaches Signature

**PARTICIPANT WAIVER**

Date: \_\_\_\_\_

Diver's Name: \_\_\_\_\_



Birth date: \_\_\_\_\_ Class / Program Level: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone # (Home): \_\_\_\_\_ Phone # (Work): \_\_\_\_\_

Phone # (Cell): \_\_\_\_\_

The McCormick Divers offer some classes and programs on a limited basis. There are certain risks inherent in the use of equipment and / or participation in certain programs that you should consider before you begin such activities.

As a participant in these classes and programs, the undersigned on behalf of our minor dependents and ourselves (collectively, "our") understand that participation can involve physical activity which could result in injury. The undersigned also understands that use of the facilities is exclusively limited to the area(s) in which the class or program is being conducted and that use will be strictly under Coaching Staff supervision.

For, and in consideration of McCormick Divers sponsoring these classes and programs, and the City of Long Beach allowing use of its facilities for this program, and with the understanding of the risks involved in our participation, the undersigned, on behalf of ourselves, our dependents and heirs agree to release and forever discharge the McCormick Divers and the City of Long Beach, their officers, directors, employees, contractors and agents from any and all liabilities, demands or claims for loss or damage resulting from an injury or damage which may be sustained on account of our participation in these classes or programs, or use of the facilities.

Date: \_\_\_\_\_ Signature (Parent / Guardian if minor): \_\_\_\_\_

### **EMERGENCY MEDICAL FORM**

I, the undersigned or parent / legal guardian of \_\_\_\_ ("Participant"), do hereby authorize and consent to McCormick Divers, a California for-profit business ("Authorized Party"), obtaining for the Participant any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital or emergency room care facility ("Medical Facility") care to be rendered to the Participant under the general or special supervision of any member of the medical staff and emergency room staff licensed under the provisions of the Medicine Practice Act or a dentist licensed under the provisions of the Dental Practice Act and on the staff of any acute general hospital holding a current license to operate a hospital from the State of California Department of Public Health. It is understood that this authorization is given in advance of any specific diagnosis, treatment or Medical Facility care being required and, except as expressly limited below, is given to provide authority and power to render care which a Physician and Surgeon or Dentist in the exercise of his best judgment may deem advisable. It is understood that effort shall be made to contact the undersigned by telephone at the numbers listed below prior to rendering treatment to the participant, but that any of the above treatment will not be withheld if the undersigned cannot be reached. If the Authorized Party is a corporation this authorization shall include any officer, director or employee of said corporation or its affiliates. It is further understood that I (we) the undersigned are responsible for all charges for the above mentioned diagnosis, treatment or hospital care.



This authorization is given pursuant to Section 25.8 of the Civil Code of California.

Limitations (if any):

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

This consent shall remain effective until: \_\_\_\_\_

Contact Phone Numbers:

Father's Name: \_\_\_\_\_ Home: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_

Cell: (\_\_\_\_) \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Home: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_

Cell: (\_\_\_\_) \_\_\_\_\_

Medical Information:

Birth date: \_\_\_\_\_ Last Tetanus Toxoid Booster: \_\_\_\_\_

Physician OR Christian Practitioner: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Known Allergies to drugs or foods: \_\_\_\_\_

Insurance Co: \_\_\_\_\_

Policy Number: \_\_\_\_\_

**PARENT SURVEY**

Parent Name(s): \_\_\_\_\_

Diver Name(s): \_\_\_\_\_

Diving Level: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Home Phone: \_\_\_\_\_



Cell Phone: \_\_\_\_\_

Computer proficiency: \_\_\_\_\_

Special skills: \_\_\_\_\_

Do you have any expertise in / business contacts in / or desire to help the Booster Club in any of the following areas?

Website Expertise: \_\_\_\_\_ Travel Coordinator: \_\_\_\_\_ Printing: \_\_\_\_\_

Grant Writing Experience: \_\_\_\_\_ Art Design: \_\_\_\_\_ Journalism / Press Releases: \_\_\_\_\_

Floral Design / Decorations: \_\_\_\_\_ Obtaining Donations from local businesses: \_\_\_\_\_

Own a store or restaurant: \_\_\_\_\_ Catering business or experience: \_\_\_\_\_

Music business or experience or own equipment: \_\_\_\_\_

Own professional video or camera equipment: \_\_\_\_\_

Would be willing to volunteer time to make phone calls for a "phone tree": \_\_\_\_\_

Have any older teenagers that need to earn "service hours" for school, community clubs, church or temple that would be willing to help out with our dive show, swim meet, or babysitting during our booster club meetings?:\_\_

(Please give us their names and ages \_\_\_\_\_)

THANK YOU VERY MUCH...

YOU'RE McCORMICK BOOSTER CLUB & BOARD MEMBERS... WE APPRECIATE YOUR SUPPORT!

**FUNDRAISING OPPORTUNITIES**







### **Fundraising that's Easy and a Proven Success!**

We offer the best vehicle for simple, year-round fundraising. eScrip, [www.escript.com](http://www.escript.com), streamlines the whole fundraising process and puts everyone, the organization, the kids, their parents, and the community, in the winner's circle.

*"eScrip is the true definition of a perfect fundraiser; small effort coupled with a high financial return. We have received over \$23,351 from eScrip for just swiping our registered cards at participating merchants."*

- Brenda Weber

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- You register any one or all of your existing grocery loyalty, debit and credit cards for use in the program.
- Participating merchants will make contributions to your chosen group, based on purchases made by you, just by using the cards you have registered.
- Your purchases are tracked and available to you online, allowing you to see just how much you are earning on your child's behalf!

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