



Ripon Aquatics Center
304 N. Acacia St.
Ripon, CA 95336

Phone: 599-3859 or 596-1466
www.RiponAquatics.com

Ripon Aquatics Water Polo Membership Form

Athlete's Data:

_____ **Water Polo only** _____ **Water Polo/Year Round Combination**

#1 Player _____ Age _____ Birth Date: _____
 First Middle Initial Last

Male/Female _____ Water Polo Registration Number: _____

_____ **Water Polo only** _____ **Water Polo/Year Round Combination**

#2 Player _____ Age _____ Birth Date: _____
 First Middle Initial Last

Male/Female _____ Water Polo Registration Number: _____

Athlete Goals: _____

Family Data:

Father's Name _____ Cell Phone: _____

Mother's Name: _____ Cell Phone: _____

Billing Address: _____ City: _____

Home Phone: _____ Zip: _____

Email: _____ Swimmer # 1 email: _____

Swimmer # 2 email: _____



Financial Commitments:

- Monthly Water Polo Fees
- Tournament Costs (fees will be divided among participants equally)

Parent Support Commitments

Volunteers

- Volunteers are welcome. Our team is run at the assistant of parent volunteers. If you are interested in volunteering and have skills in a particular area, please let us know.

In consideration of the privilege of membership on Ripon Aquatics, I/we, the parents/guardians of the swimmers named above hereby hold the team, and employees free and harmless from any liability for loss, injury or damages they, or our swimmer(s) may incur as a result of participation in team events, activities, including travel to and from such activities, and we assume the team's responsibility for such liability. I/We also agree that, in the event, my/our family's swim fees become delinquent, I/we will pay for all collection costs incurred by Ripon Aquatics, including court costs, if necessary.

We have read the above form and understand that the fulfillment of these commitments is necessary for the welfare and the success of Ripon Aquatics Swim Team. We understand that this fulfillment will be conditions for continuance of our swimmer(s) on the team. We all agree to support the Ripon Aquatics program and coaching staff and understand that any behavior that is deemed by the coaching staff to be detrimental to the success, progress, or reputation of the team and coaching staff may be grounds for dismissal.

Signature _____ Date _____

Signature _____ Date _____