



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# T.ogether E.veryone A.chieves M.ore

## CO-ED STINGRAY SWIM TEAM SOUTHERN PRAIRIE YMCA



Swim Team is designed to encourage and motivate each swimmer to develop their competitive swimming skills and personal character. This includes quality instruction and building confidence through goal setting, promoting a positive work ethic and creating opportunities for achievement. We also seek to build relationships and create a community where every swimmer is valued, connected and supported.

**Requirements:** Participants must be able to swim 25m unassisted and be a YMCA member at time of registration.  
Boys and Girls ages 5-21 years

**Blue Group:** Younger and/or Recreational Swimmers  
Practice: Tues/Thurs 6:30-7:30pm  
Monthly Fee: \$35 (4 months)  
Dates: Oct 1-Feb 9

**Black Group:** Competitive Swimmers  
Practice: Mon/Tues/Thurs 5:30-7:30pm; Saturdays 8:45-10 (when scheduled)  
Monthly Fee: \$45 (5 months)  
Dates: Oct 1-March 17

**Meets:** 1-2 Saturdays/month (Nov-Jan), plus championship meets (Feb-Mar)  
Parents will need to provide transportation to/from meets.

**Cost:** Annual Registration Fee \$50 (Due at registration)  
(covers Team Registration, Meet Fees, Team Suit/Cap)  
Monthly Fee (Payable in full at registration or the 30th of each month)  
\*Family Discount: \$10 off monthly fee for additional swimmers in the same family  
\*Financial Assistance available for those who qualify.

**Parent Meeting:** Monday, September 24 at 6:30pm

**Coach:** Nicole Webber

**Questions?** Email Nicole at [stingrays@southernprairieymca.com](mailto:stingrays@southernprairieymca.com)  
Click on the Youth Development/Stingray tab at [www.southernprairieymca.com](http://www.southernprairieymca.com)  
Contact Missy Wernli, Aquatics Director at 641-782-9622



**SOUTHERN PRAIRIE YMCA**

1201 W TOWNLINE, CRESTON, IA 50801

641-782-9622

[WWW.SOUTHERNPRAIRIEYMCA.COM](http://WWW.SOUTHERNPRAIRIEYMCA.COM)

## Southern Prairie YMCA Stingray Swim Team 2018-2019

Swimmer's Name	SwimSuit Size	Shoe Size (fins)	Age	Date of Birth MM/DD/YYYY	Practice Group
1.					Blue OR Black
2.					Blue OR Black
3.					Blue OR Black

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

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

Primary Contact: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_

Relationship to Swimmer: \_\_\_\_\_

Relationship to Swimmer: \_\_\_\_\_

Primary Email: \_\_\_\_\_

Secondary Cell #: \_\_\_\_\_

Primary Cell #: \_\_\_\_\_

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

Text OK? Yes/No

Occupation: \_\_\_\_\_

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

Occupation: \_\_\_\_\_

Latex Allergy? Yes/No

Medical Conditions or Special Notes:

\_\_\_\_\_

\_\_\_\_\_

In my absence and in the event of physical injury to my child(ren), I hereby allow my child(ren) to be treated by a physician or other medical personnel. To properly treat a physical injury, this may mean using ambulance and hospital services in the local area where the injury was sustained.

\_\_\_\_\_  
(Parent of Guardian Signature)

\_\_\_\_\_  
(Date)

The Southern Prairie YMCA has permission to photograph my child and use photos in marketing/promotional materials for the Y.

YES \_\_\_\_\_ NO \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_

**For a swim team to function, we need the help of all families by volunteering in some way. Please note below the volunteer roles you would be interested in helping out with.**

Timer \_\_\_\_\_ Team Photography \_\_\_\_\_ Provide food/snacks for Team Events \_\_\_\_\_

Interested in becoming a certified official? Yes\_\_ No\_\_ Name: \_\_\_\_\_

Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ YMCA Member: \_\_\_\_\_