

# TIGERS WATER POLO

The strength of the team is each individual member... the strength of each member is the team.



## ATHLETE MEMBERSHIP REGISTRATION FORM

- Tigers Aquatics Water Polo ● Princeton University DeNunzio Pool ● Princeton, NJ ●
- Phone: 856-220-5714 ● Fax: 856-829-0190 ● [tigerswaterpolo@gmail.com](mailto:tigerswaterpolo@gmail.com) ● [www.tigersaq.com](http://www.tigersaq.com) ●
- *Membership automatically renewed every year until cancelled/revoked in writing* ●

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Father's (Guardian) Name: \_\_\_\_\_ Mother's (Guardian) Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ Secondary Email: \_\_\_\_\_  
 Date: \_\_\_\_\_ Athlete/Parent (for Minors) Signature: \_\_\_\_\_

**All members agree to pay annual membership fees in three installments per year at the beginning of each session**

(Session I: September through December, Session II: January through April, Session III: May to August).

Membership is automatically renewed every year until cancelled/revoked in writing

(email to [tigerswaterpolo@gmail.com](mailto:tigerswaterpolo@gmail.com) is sufficient).

Members are required to sign up online at Club's website <http://www.tigersaq.com> for each session and pay \$10 non-refundable registration fee. The full session bill will be sent to the member within a week of the session start and can be paid by one of the preferred payment methods indicated below. Please notify Tigers Aquatics Water Polo Club immediately of any changes in your mailing or email addresses, phone numbers, billing information, emergency contact information and health care insurance. Prices listed below are for the 2010-2011 season and are subject to change.

Membership Type	Price	Session I	Session II	Session III	Comments/Special Requests
Full Membership	\$450	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Partial Membership*	\$275	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Splashball	\$350	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
College Student	\$10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sibling Discount**	\$50				

\*Players attending practices once a week (usually Sundays) should choose Partial Membership type

\*\*Each sibling gets \$50 discount off his session payment.

**Member agrees to pay for each Session by September 15, January 15 and May 15 of the year:**

By **Check** payable to *Tigers Aquatics Water Polo*

Via **PayPal**

Authorize payment by **Credit Card**     Visa     Master Card     Discover

Card Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Security Code \_\_\_\_\_ Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

**Give Something Back. All donations are fully tax deductible. Thank You for your support!**

\$ \_\_\_\_\_ One Time

\$ \_\_\_\_\_ Per Session

\$ \_\_\_\_\_ Per Year

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## ATHLETE CODE OF CONDUCT

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- *All athletes agree with the Code of Conduct* ●

**Your signature constitutes your acknowledgment that you have read and will abide by the Code.**

➤ **The following are mandatory:**

- Appropriate behavior at all times. Remember that it is an honor and a privilege to be a member and represent the Tigers Aquatics Water Polo Club.
- During travel to tournaments, athletes must remain in groups of two or more or with a chaperone or coach. At no time is an athlete to be alone.
- A nightly curfew in the hotels will be established and observed.
- Attendance at team meetings and all training sessions is required.
- Appropriate attire including shoes is required at all times.

➤ **There will be no unacceptable behavior, including:**

- Committing any act considered an offense under federal, state or local laws or in violation of any [USA Water Polo rules](#).
- Behavior that is offensive or disrespectful to others.
- Unsportsmanlike conduct.
- Foul or crude language.

➤ **The following are prohibited:**

- Use and/or possession of alcoholic beverages.
- Use and/or possession of illegal drugs.
- Use and/or possession of tobacco products.
- Acts resulting in damage to, or the destruction of personal or other property.

**Note: Persons present while any prohibited activity occurs must report it immediately to a coach/chaperone or be considered participants by choice.**

➤ **Violations may result in any combination of the following:**

- Banning the athlete from practices and/or games.
- Sending an athlete home from a tournament at his/her own expense.
- Parents of athlete will make restitution for the applicable damages responsible.
- Permanent expulsion from the Tigers Aquatics Water Polo Club.
- Notifications to U.S.A.W.P. and other organizations related to the player's water polo activities, including schools.
- Other disciplinary actions, including suspension from the team or exclusion from future trips, may also be imposed at the sole discretion of the Tiger Aquatics Water Polo coaches.

**I understand the Code of Conduct of the Tigers Aquatics Water Polo Club and understand the implications of violations of this code as set forth in this document. I will represent the Tigers Aquatics Water Polo Club, my family and teammates to the best of my ability.**

**Name of Athlete** (Please Print) \_\_\_\_\_

**Signature of Athlete** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent/Guardian** (Please Print) \_\_\_\_\_

**Signature of Parent/Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

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## LIABILITY WAIVER

● Tigers Aquatics Water Polo ● Princeton University DeNunzio Pool ● Princeton, NJ ●

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● All athletes and Parents of minor athletes must sign the Waiver below, which remains active until revoked in writing ●

**In consideration of being allowed to participate in any way in the Tigers Aquatics Water Polo program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:**

- I. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce risk, the risk of serious injury does exist; and
- II. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE TIGERS AQUATICS WATER POLO, ITS OFFICERS, OFFICIALS, AGENTS, AND/OR EMPLOYEES, OTHER PARTICIPANTS, SPONSORING AGENCIES, SPONSORS, ADVERTISERS, AND, IF APPLICABLE, OWNERS AND LESSORS OF PREMISES USED TO CONDUCT THE EVENT (hereinafter collectively referred to as "Releasees") or others, and assume full responsibility for my participation; and,
- III. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation. I will remove myself from participation and bring such to the attention of the nearest club official, lifeguard or responsible adult immediately; and,
- IV. I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin, HEREBY RELEASE AND HOLD HARMLESS ALL RELEASEES, WITH RESPECT TO ANY AND ALL INJURY DISABILITY, DEATH, or loss or damage to person or property WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHT BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARY WITHOUT ANY INDUCEMENT.

Name of Athlete (Please Print) \_\_\_\_\_

X \_\_\_\_\_  
Athlete's Signature

X \_\_\_\_\_  
Date

### For Participants of Minority Age (Under 18 at Time of Registration)

This is to certify that I, as parent/guardian with legal responsibility for the participant, consent and agree to his/her release as provided above and, for myself, my heirs, assigns, and next of kin.

I release and agree to indemnify the Releasees from any and all liabilities incidental to my minor child's involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE.

X \_\_\_\_\_  
Parent/Guardian Signature

X \_\_\_\_\_  
Date

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## PARENTAL AUTHORIZATION TO CONCENT TO TREAT OF MINOR

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- *Authorization shall remain active until revoked in writing* ●

In consideration of permitting my child \_\_\_\_\_ to become a member of Tigers Aquatics Water Polo Club and to participate in the practices, scrimmage, tournaments and travel:

The agents of Tigers Aquatics Water Polo Club shall have my full permission and consent to perform any and all parental acts, as fully to all intents and purposes as I might or could if personally present, to include but not limited to discipline, supervision, arbitration of disputes and consent to any and all medical care and treatment necessary and appropriate for the general health and well being of my child. Neither said agent nor any organization involved assumes any financial responsibility for exercising this action.

- I hereby certify that the above child's date of birth is \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_.
- I further certify that as of \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ (date) my child is in good health.
- I hereby give my permission for any of the coaches, chaperones and/or other agents of the Tigers Aquatics Water Polo Club to take my child for emergency medical treatment at my expense. If in an emergency we cannot be reached and our family physician is not available, let this form serve as consent for our child to be cared for by the closest available medical personnel and facility.

### (Please print)

Parent/Guardian Name(s) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

### Emergency Contacts:

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Medical Problems/Conditions \_\_\_\_\_

Family Physician \_\_\_\_\_ Phone \_\_\_\_\_

Hospital/Medical Insurance Plan \_\_\_\_\_ Subscriber Number \_\_\_\_\_

Parent/Guardian Signature(s) \_\_\_\_\_ Date \_\_\_\_\_