

AQUATICS IN MARIN

'09/'10 Winter Water Polo



The 2009-2010 Winter Water Polo Program is for boys & girls age 7-18. For those new to club water polo, this is a great opportunity to experience club water polo without making a significant commitment. This program will introduce athletes to practice and competition with a strong emphasis on the basic fundamentals of the game. For those returning to Marin Water Polo this will continue your development of important fundamentals, keep your interest alive with competition through the winter months and prepare you for the upcoming spring & summer seasons.

Participation in all practice sessions and competitions is encouraged.
Please mark your calendars and plan accordingly.

Program Dates: November 16 - February 7
Practice Location: Redwood High School & Indian Valley Campus (Redwood HS unless otherwise listed)
Practice Dates, Days & Times: For All Groups - No Practice November 26, December 18 through January 3, & January 18

Beginner Polo (1st, 2nd & 3rd graders),
November 16 - December 16 & January 5 - February 3
November 16 - December 3
Mondays & Wednesdays 4-4:45pm
December 7 - February 3
Tuesdays & Thursdays 5:30-6:15pm

Junior Polo (4th - 8th graders) (Redwood OR IVC)
Redwood HS
November 16 - December 16 & January 5 - February 4
Mondays & Wednesdays 4-5:30pm
Indian Valley
November 17 - December 17 & January 5 - February 3
Tuesdays & Thursdays 6:15-7:45pm

High School Polo (9th - 12th graders plus select 8th graders)
November 16 - December 3
Mondays 6:45-8:15pm @ IVC
Wednesdays 6:15-8pm @ IVC
December 7 - February 4
Mondays & Wednesdays 5:30-7pm (Redwood HS)

In addition to the practice nights we will have scrimmage nights at IVC. Those will be scheduled and announced based upon our sign-ups and schedules.

IVC Parking While the College of Marin (COM) is in session, parking permits are required Mondays through Fridays. Please follow the COM posted signs for specific directions in purchasing a parking permit. Parking permits are not required on weekends.

Competitions:

After reviewing the information below, please complete the availability form and return with your registration. By completing the availability form this will ensure appropriate numbers on teams for competitions and allow us to appropriately plan for all of our events.

New Zealand to California

In early January, a high school team from New Zealand will be traveling to Northern California. The team will arrive on Thursday January 7. They will stay with our team through the January 9/10 weekend and then will depart for Southern California.

Additional information regarding this cultural exchange and playing opportunity will be distributed in early December.

Northern California Winter League

December 19-20, January 9-10, January 30-31 & February 6-7

Note: On Saturdays the Open and 10th grade and under teams play. On Sundays the 12th grade, 8th grade & 6th grade and under teams play. Depending on ability, players may be asked to play in an age group higher than their age.

Travel Tournaments

Girls - January 22-24, Vancouver, Canada

Boys - February 12-14, Los Alamitos Winterfest Tournament

Registration:

Complete the AIM registration form and return to the address listed on the form. Please see refund policy on page 3.

Program Fees

The program fees listed below cover practice fees, local competition fees and an AIM team backpack.

Travel tournaments will be additional.

- Beginner Polo - \$160 (very limited competitions)
- Junior Polo - \$295
- High School Polo - \$415

If you are planning to swim & play polo for AIM, please refer to BUNDLE program fees on swimming flier.

The above fees do not include membership to USA Water Polo (USA WP). Membership to USA WP as a member of the Marin Water Polo Club for the duration of the winter program is required prior to registering. See below regarding membership to USA WP.

USA Water Polo Membership

Annual (calendar year, November 1, 2009 through December 31, 2010) membership to USA Water Polo is currently available for \$50-70 depending on level of membership. This membership allows for participation in practice and competitions.

To register with USA Water Polo, please log onto usawaterpolo.com. Click on 'Join Now' and follow the directions to become a member. When prompted for club or zone information, please supply the following information:

Club - Marin Water Polo Club - Club #473, Zone - Pacific Zone - Zone #6

Membership to USA Water Polo will be checked at the first practice attended. Please be prepared to show proof of membership. Registrations will only be processed for those who have membership to USA Water Polo for the duration of the winter program.

AIM Refund/Returned Checks Policy

Refunds for '09/'10 Winter Water Polo Programs are allowed prior to November 25; a \$25 processing fee will be charged. Program fees will not be pro-rated. Returned checks are subject to a \$100 charge or three times the amount of the check, whichever is less.

Questions?

Andrew Morris at (415) 320-6222 or at marinwaterpolo@gmail.com.

To be completed by Junior & High School Polo Players

Winter Water Polo COMPETITION AVAILABILITY FORM

Name: _____

Grade (circle one): 12 11 10 09 08
 07 06 05 04

Phone: _____

E-Mail: _____

LOCAL COMPETITION AVAILABILITY

- Please indicate by checking the box next to the weekend day(s) you are **NOT** available to participate.
- Plans will be made based upon your availability. If you change your availability less than two weeks prior to the tournament you could be subject to a \$75 fine per change.
- If you indicate that you are available, games could be scheduled anytime between the hours of 7am-7pm. In addition, rides to and from each tournament are to be arranged on your own.

- December 19 Northern California Winter League
- December 20 Northern California Winter League
- January 9 Northern California Winter League
- January 10 Northern California Winter League
- January 30 Northern California Winter League
- January 31 Northern California Winter League
- February 6 Northern California Winter League
- February 7 Northern California Winter League

TRAVEL COMPETITION AVAILABILITY

GIRLS

- January 22-24, Vancouver, Canada

By indicating you are available this will allow us to begin planning for this trip. It does not commit you to participating. A commitment to participate will be asked for in early December after additional details can be provided.

BOYS

- February 12-14, Los Alamitos Winterfest Tournament

By indicating you are available this will allow us to begin planning for this trip. It does not commit you to participating. A commitment to participate will be asked for in early December after additional details can be provided.

Please return this form along with your registration form.

AQUATICS IN MARIN

ATHLETE'S FULL NAME: _____ BIRTHDATE: _____

AUTHORIZATION OF CONSENT TO TREAT A MINOR

The undersigned parent or guardian of _____, a minor, do hereby consent to any emergency x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and surgeon licensed under the provisions of the Medical Practice Act.

It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power on the part of our aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable; and neither said agent or any organization involved assumes any financial responsibility for exercising this action.

This authorization is given pursuant to the provisions of Section 6910 of the Civil Code of California.

1. Family Doctor and/or Associate: _____

Phone: (_____) _____

2. Persons to contact in emergency:

A. _____ Phone: (_____) _____

B. _____ Phone: (_____) _____

3. Medical Problems: _____

4. Hospital Insurance Plan and/or Medical Plan: _____

This Authorization shall remain effective until revoked in writing.

Parent or Legal Guardian (Print): _____

Parent or Legal Guardian (Signature): _____

Address: _____ City: _____ Zip: _____

Home Phone: (_____) _____ Work Phone: (_____) _____

AQUATICS IN MARIN - REGISTRATION FORM

(Please Print)

ADULT INFORMATION:

Last Name: _____ First Name: _____ Home Phone: _____

Address: _____ City: _____ Zip Code: _____ Work Phone: _____

E-mail address: _____ Emergency Contact: _____ Phone: _____

Participant Name	Gender (M/F)	Birth date	Class/Program Title	Season	High School & Grade (Fall '06)	Fee
TOTAL						

Please check this box if you do not want your information shared with other members of AIM. (Information is shared for carpool lists, phone lists, team rosters, etc.)

✓ BE SURE TO READ AND SIGN BELOW

In consideration of the payment of fees and the resulting granting of team membership privileges and, due to my knowledge and experience around swimming facilities, I hereby waive, release and discharge any and all claims and causes of action for damages due to my death, personal injury or property damage which I may have, or which may hereafter accrue to me, as a result of my team membership and the use of any swimming pools and associated facilities. This waiver and release is intended to discharge in advance the team as well as its officers, agents, employees and all related persons and/or entities, from and against any and all liability, injury, loss or damage arising out of and connected in any way with my participation with said entity and/or any facilities or in any event or activity associated with said entity and/or any facilities even though that liability might arise out of the active and/or passive negligence or carelessness on the part of the entity or persons mentioned above.

I understand that incidents, even of a serious and life threatening nature occasionally occur during the utilization of swimming pools and related facilities and participation in water related activities, due to, not by way of limitation, slips, falls, collisions and other water related hazards. Knowing the risks attendant with the use of swimming pools and related facilities and the participation in water related activities, nevertheless, I hereby agree to assume those risks and to release, indemnify and hold harmless all the persons or entities mentioned above, who, even through, not by way of limitation, active and/or passive negligence or carelessness, might otherwise be liable to me or my heirs or assigns for damages by reason of any and all accidents, illness, injury or death or other consequences related to such utilization, whether reasonably foreseen or not reasonably foreseen. This waiver, release, assumption of risk, indemnification and hold harmless agreement is to be binding upon my heirs and assigns.

I agree to accept and abide by the rules and regulations of the team
 All adults covered by this application have signed and all minors subject to it have been covered through the execution of this Release by their parents and/or guardians.

Signature: _____ Date: _____

Registrations can be mailed or hand delivered to practice.

Please mail registrations to Aquatics in Marin, 940 Via Escondida, Novato, CA 94949 (415) 320-6222



If you choose to pay with your Visa or Mastercard, please complete the form below.

Please note that there will be an additional \$20 fee per participant fee to use your credit card.

Please circle card type: VISA MASTERCARD

Card Number: _____ Expiration Date: _____

PRINT NAME as it appears on card: _____

Amount to be charged: _____

I as the above listed card member authorize Aquatics in Marin to charge my above listed credit card in the amount listed above.

Signature: _____ Date: _____