

BCYF Quincy Community Center 2016-2017



Join a fun and encouraging recreational Youth Swim Team for boys and girls 17 years old and younger. Swimmer must be able to swim 1 length (25 yards) of freestyle with rotary breathing.

COST: \$50, plus valid QuincyCC youth membership (\$5/year)

PRACTICES: Tuesdays & Thursdays, 6:15pm – 8:15pm

** Minimum 1 practice per week*

SEASON: December 6, 2016 – March 30, 2017

** Swim meets on Friday evenings (6:00pm Warm-ups; 6:30pm Meet Starts)*

DATE	MEET/POOL LOCATION	ADDRESS
12/16/16 (Friday)	Paris Street Pool	113 Paris Street; East Boston
1/13/17 (Friday)	QuincyCC Pool (<i>Home Meet</i>)	885 Washington Street; Chinatown
1/27/17 (Friday)	Flaherty Pool	160 Florence Street; Roslindale
2/03/17 (Friday)	QuincyCC Pool (<i>Home Meet</i>)	885 Washington Street; Chinatown
2/10/17 (Friday)	CharlestownCC Pool	255 Medford Street; Charlestown
3/03/17 (Friday)	QuincyCC Pool (<i>Home Meet</i>)	885 Washington Street; Chinatown
3/10/17 (Friday)	Paris Street Pool	113 Paris Street; East Boston
** 3/25/17 (Sat) – Championship **	Location TBA	Location TBA

Schedule subject to change due to inclement weather and/or other extenuating circumstances.

Ongoing sign-up starting **Tuesday, November 22nd, 3:45pm**
at the Quincy Community Center Front Desk

LOCATION: BCYF Quincy Community Center Pool

(inside the Josiah Quincy Elementary School)

885 Washington Street | Boston, MA 02111 (Chinatown)

617-635-5129, ext. 1060

CONTACT:

Helen Wong 617-635-5129, ext. 1086 or Helen.Wong@boston.gov



BCYF Quincy Community Center
Youth Swim Team 2016-2017
Swimmer Registration Form

SWIMMER INFO - Please fill out the following:

NAME: _____ **DATE OF BIRTH:** _____ **M / F** _____

ADDRESS: _____ **PHONE:** (____) _____

PARENT'S NAME(S): _____ **E-MAIL:** _____

EMERGENCY CONTACT INFO:

NAME: _____ **PHONE:** (____) _____

RELATIONSHIP: _____

QCC swimmers have a long tradition of not only excellence in the pool, but good sportsmanship and respect for teammates, coaches, officials, and opponents. To continue this tradition, we expect every member of the QCC Youth Swim Team to adhere to the following Code of Conduct:

- Respect all teammates, coaches, officials, parents, opponents, and BCYF staff. This respect shall extend outside of the pool to the school and community.
- Be responsible for your swimming effort and commitment, including: arriving at practices and meets on time and be ready; and put forth maximum effort at all times.
- Be prepared for practice and meets: bring your swimsuit, goggles, cap, towel, and water.
- Eat healthy food and drink plenty of fluids.

Disciplinary Procedure

Failure to follow the Code of Conduct as well as Pool or BCYF rules will result in the following disciplinary action:

Step 1: Verbal warning

Step 2: 5-10 minute timeout (time determined by action)

Step 3: Asked to leave practice or meet

Step 4: Suspension and contact with parents. Length of suspension to be determined by severity of swimmer's action.

Step 5: Expulsion from swim team.

Note: One or more of these steps may be bypassed to address instances deemed by the coaches to be severe or threatening to others.

Consent

☐ I have read and understand the BCYF Code of Conduct and the BCYF Pool Rules and Regulations. I agree that I will act in accordance with the BCYF Code of Conduct and abide by BCYF's Pool Rules and Regulations.



OVER

The application is factual and complete to the best of my ability.

I hereby waive and release any and all rights, causes of action, and claims for damages I may have against the City of Boston, Boston Centers for Youth & Families, and any and all other associated individuals or organizations, for any and all personal injuries or property damage resulting from my participation in Boston Centers for Youth and Families Programs.

I, the undersigned parent or guardian of [_____], a minor, hereby consent to his/her Boston Centers for Youth and Families membership and waive and release any and all rights, causes of action and claims for damages I may have against the City of Boston, Boston Centers for Youth & Families, and any and all other associated individuals or organizations, arising out of any and all personal injuries or property damage which I may now or hereafter have as the parent or guardian of said minor, and also all rights, causes of action, and claims which said minor has or may acquire resulting from his/her participation in the program.

I give consent for me/my child to be administered first aid and to be treated by an emergency medical technician-paramedic, nurse or physician. Any follow up medical attention may be given at a local hospital and transportation to a Boston hospital is authorized. I give my consent for photographs, audiotapes, and video records of me/my child to be used by Boston Centers for Youth & Families for publicity purposes. I also agree to allow Boston Centers for Youth & Families to use photographs, audiotapes, video records or other work produced by the member for publicity purposes.

I understand that transportation is not provided and it is my responsibility to arrange transportation to and from Boston Centers for Youth & Families Community Centers. Failure to comply with these rules and expectations can lead to termination of membership.

Swimmer's Signature:

DATE

Parent's Signature:

DATE

FOR STAFF USE ONLY

MEMBERSHIP:	YES / NO
SWIM TEAM FEE:	CASH /CHECK
AMOUNT PAID:	_____
RECEIPT #:	_____
STAFF INITIAL:	_____

