

# CODS Swim Program

Winter/Spring 2012 SESSION REGISTRATION  
(Please print, complete and fax or mail this form to our address below)

Parent's Names: \_\_\_\_\_

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

(City) \_\_\_\_\_ (ST) \_\_\_\_\_ (ZIP) \_\_\_\_\_ Phone: \_\_\_\_\_

Dad Work Phone \_\_\_\_\_ Dad Cell \_\_\_\_\_ Dad E-Mail \_\_\_\_\_

Mom Work Phone \_\_\_\_\_ Mom Cell \_\_\_\_\_ Mom E-Mail \_\_\_\_\_

In consideration of my child's participation in a CODS Swim Program, I will be legally bound, do hereby for myself, children, heir, executors, administrators, and assigns waive, release and forever discharge any and all rights and claims for damages which may be sustained and suffered by my children in connection with my travel to and from or participation in any and all activities of CODS Swim Program, including but not limited to all swim sessions, swim meets and meetings.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

No child will be allowed to swim without a signed registration form on file. Prior session consent does not apply to current session.

Swimmer # 1: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Program: \_\_\_\_\_ Practice Days-Times: \_\_\_\_\_

Swimmer # 2: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Program: \_\_\_\_\_ Practice Days-Times: \_\_\_\_\_

Swimmer # 3: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Program: \_\_\_\_\_ Practice Days-Times \_\_\_\_\_

If more than three swimmers, please use a second form and change Swimmer Number(s) to appropriate number.

Swimmer #1 \_\_\_\_\_ Please Circle Payment Plan  
Payment Plan 1 or 2 or Pay in Full Cost: \_\_\_\_\_

Swimmer #2 \_\_\_\_\_ Payment Plan 1 or 2 or Pay in Full Cost: \_\_\_\_\_

Swimmer #3 \_\_\_\_\_ Payment Plan 1 or 2 or Pay in Full Cost: \_\_\_\_\_

Quince Orchard Swim Club Fee of \$35.00 per each child registered is included: \_\_\_\_\_

(see our website for further information about this QO Fee)

Plan 1 = Pay \$135 per child with registration - pay balance by 1/15/12.

Plan 2 = Pay \$135 per child with registration - pay 3 payments: 2/15/11, 3/15/11, 4/15/11.

Pay in full with registration.

Total Cost: \_\_\_\_\_

We accept: Visa or MasterCard or Discover Please circle card being used.

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Validation Num: \_\_\_\_\_

(The Visa/MasterCard/Discover Card validation number is the last three numbers (sometimes four) in the signature area on back of the card.)

Please see information on our website at [www.coachondeck.com](http://www.coachondeck.com) regarding credit card payments.

Amount of payment: \_\_\_\_\_ Name on card \_\_\_\_\_

If paying by credit card—you may fax your form to us at 301-738-8833 or send to:

If paying by check - send this form along with payment to:

Coach On Deck Swimming

P.O. Box 83525

Gaithersburg, MD 20883

CODS Swim Program Schedule				
	Sun.	Tue.	Wed.	Thur.
<b>SENIOR TEAM</b>	5-6pm 6-7pm	7-8pm	5-6pm	7-8pm
<b>JUNIOR TEAM</b>	4-5pm 5-6pm 6-7pm	7-8pm	5-6pm	6-7pm 7-8pm
<b>-CLINICS- BEGINNERS</b>	4-5pm 5-6pm		5-6pm	6-7pm
<b>ADVANCED</b>	4-5pm 5-6pm		5-6pm	6-7pm

**Winter/Spring 2012 Program Cost:  
Senior Team/Junior Team/Clinic**

1 hr. /week for 17 weeks =	\$375
2 hrs./week for 17 weeks =	\$613
3 hrs./week for 17 weeks =	\$800
4 hrs./week for 17 weeks =	\$893
Unlimited for 17 weeks =	call.

Prices shown include Quince Orchard Pool Energy Surcharge of \$35 per swimmer.

**PAYMENT PLANS:**

**Standard:** Balance due by Feb. 15, 2011

**Monthly:** 3 payments, Feb. 15, Mar. 15, and Apr. 15, 2011.

-Parent(s) registering one swimmer will pay a total of \$375 for the 17 week session, this includes the \$35 QO fee.

-Parent(s) pay \$135 deposit with Registration, leaving a balance of \$240 to be paid monthly:  
\$80, due by Feb. 15, \$80, due by Mar. 15, \$80, due by Apr. 15.

-Of course you may pay the outstanding balance at any time before May 15.

**DISCOUNTS (applicable to all programs)**

**Example:** You may take a 5% discount for each additional child after the first child, regardless of the particular program in which the child is enrolled.

Jane pays full cost -	1 hr. wk. = \$375.00 includes \$35 QO Energy Fee
Jane's sister 5% discount -	1 hr. wk. = \$358.00 includes \$35 QO Energy Fee
Jane's brother 10% discount -	1 hr. wk. = \$341.00 includes \$35 QO Energy Fee
Jane's 2nd brother 15% discount -	1 hr. wk. = \$324.00 includes \$35 QO Energy Fee

**NOTE: Discounts are not applied to QO Pool registration fee!**

**Paying with a Credit Card:** We accept Visa, Master Card and Discover Card.

When submitting your credit card - you must provide the Issuer, Card Number, Expiration Date and the Validation Code (validation code number is the last three (sometimes 4) numbers in the signature area on back of the card) and the name on the card.

**NEVER send your credit card information via email.  
Send it by regular mail or fax it to us at 301-738-8833.**

**Please read the following carefully.**

When you select Plan 1 or Plan 2 for your Payment Type on the registration form, you have the following options when paying by credit card:

1. Pay for session in full on credit card.
2. Pay deposit \$135 (includes QO Energy Surcharge of \$35) with credit card then have remaining payments automatically processed:
  - If you selected Plan 1 then remaining balance will be charged to your card on or by February 15th.
  - If you selected Plan 2 then the remaining balance will be charged in three equal payments of \$80, due on February 15th, March 15th and April 15th.  
(Selecting this option means you are giving your consent to have payments charged to your card on or by the payment due date(s)).
3. Pay deposit of \$135 with credit card then make remaining three payments with credit card - (this option requires that you manually give your okay, by fax or email, for each payment to be processed on February 15th, March 15th and April 15th).