



**YMCA OF BEAUFORT COUNTY  
BYAC Swim Team 2019-2020**

**Registration Dates: August 7 – September 3  
Season Dates: September 3 – Regionals mid-March**

**If you are not sure which group to sign up for, please contact Coach Taylor.**

<b>Group 1</b>	<b>Shark Pups</b>
<b>Minimum Skills</b>	Must have passed swim lessons (or equivalent), must be able to swim 25 yards of Freestyle and Backstroke without stopping and have basic understanding of butterfly & breaststroke kicks.
<b>Practice</b>	Tuesday, Wednesday, Thursday 4:00-4:45 PM
<b>Registration Fee</b>	(one time) \$50 non-refundable
<b>Monthly Fee</b>	\$70 per swimmer/month Y member • \$90 per swimmer/month non-member

<b>Group 2</b>	<b>BYAC Tigersharks Swim Team</b>
<b>Minimum Skills</b>	Must be able to swim 50 yards of all four strokes technically correct and without stopping.
<b>Practice</b>	Monday, Tuesday, Wednesday, Thursday 4:45-5:45 PM
<b>Registration Fee</b>	(one time) \$50 non-refundable
<b>Monthly Fee</b>	\$75 per swimmer/month Y member • \$100 per swimmer/month non-member

<b>Group 3</b>	<b>BYAC Tigersharks Swim Team</b>
<b>Minimum Skills</b>	Must be able to swim 100 yards of all four strokes technically correct and without stopping with proper start, turns, and finish.
<b>Practice</b>	Monday, Tuesday, Wednesday, Thursday 4:45-6:15 PM & Friday 4:45-5:45 PM
<b>Registration Fee</b>	(one time) \$75 non-refundable
<b>Monthly Fee</b>	\$80 per swimmer/month

**Additional Information and Fees:**

- **Siblings receive \$10 off monthly fee.**
- Swimmer **MUST** be a **Y Member** to compete in **YMCA away Meets! (Not required for our Home Meet)**
- Away Swim Meet Fees and coach's travel fees are in addition to the above fees.
- HOME swim meet is no charge for swim team members.
- Required Gear: Competitive style swim goggles and appropriate swim attire, water bottle.
- Each swimmer will receive a BYAC swim cap and t-shirt.
- Participation in swim meets is highly encouraged for all swimmers to hone competitive swimming skills and track progress.

**CYSL WINTER 2019-2020 SWIM MEET SCHEDULE**

- September 14<sup>th</sup> Summerville YMCA
- November 9<sup>th</sup> Columbia YMCA
- December 7<sup>th</sup> Beaufort (HOME MEET)
- December 14<sup>th</sup> Columbia YMCA
- January 11<sup>th</sup> Columbia YMCA
- February 1<sup>st</sup> Georgetown YMCA
- Feb 29<sup>th</sup>-March 1<sup>st</sup> CHAMPIONSHIP MEET Greenwood YMCA (**Must go to 2 meets and swim the time standards to qualify**)
- TBA Regionals (mid-March) will be held at the Middle Tyger YMCA in Spartanburg, SC

**WARDLE FAMILY YMCA**

**Aquatics Director: Lou Bergen: [l.bergen@wardlefamilyymca.org](mailto:l.bergen@wardlefamilyymca.org) or (843)-522-8622 ext. 236**

**Head Coach: Taylor Lloyd [tdkeen15@gmail.com](mailto:tdkeen15@gmail.com)**

1801 Richmond Ave., Port Royal, SC 29935 • 843-522-9622 • beaufort-jasperymca.org

**PARENT/LEGAL GUARDIAN INFORMATION:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip \_\_\_\_\_

Best number to reach you: (\_\_\_\_\_) \_\_\_\_\_ Alternate: (\_\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_ Y Member? \_\_\_\_ Y \_\_\_\_ N

Swimmer Name (F, MI, L)	D.O.B	Age	Gender	Group 1,2,3*	T-Shirt Size
					<input type="checkbox"/> YS <input type="checkbox"/> YM <input type="checkbox"/> YL <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L
					<input type="checkbox"/> YS <input type="checkbox"/> YM <input type="checkbox"/> YL <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L

**\*Practice Groups – At Registration please enter Group 1, 2, or 3 for each swimmer based on the minimum skill criteria listed on page one of this form. Coaches will evaluate all swimmers and if necessary move swimmers to a different Practice Group at start of season and during season as swimmer progresses.**

**Payment Information:** Payments will be made through a pre-authorized checking account or credit card draft. THERE ARE NO PAYMENTS MADE AT THE FRONT DESK after the initial registration (no exceptions). \$25 fee returned check charge/ \$15 fee returned credit cards charge.

**Credit Card No:** \_\_\_\_\_ Exp. date: \_\_\_\_\_ CVV: \_\_\_\_\_

\_\_\_AMEX: \_\_\_Discover: \_\_\_ MC: \_\_\_VISA: Signature of Card Holder: \_\_\_\_\_

**Bank Name:** \_\_\_\_\_ Checking/Saving No: \_\_\_\_\_

Transit Routing No/ABA: \_\_\_\_\_ Signature of Card Holder: \_\_\_\_\_

**Draft Dates are : Oct. 1, Nov. 1; Dec. 2, Jan. 2; Feb. 3**

**Note: Registration and payment are required before each month begins. Failure to make payments by payment due dates will result in automatic removal from the SWIM TEAM BYAC or SHARK PUPS. I have read, fully understand, and AGREE to the polices stated in this registration form:**

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

Waiver/ Consent:

I hereby consent for my child or ward, named on the above registration, to participate in YMCA group lessons, pre swim team or the BYAC Tiger Shark swim team and agree to release the YMCA of Beaufort County, swim instructors, coaches, lifeguards and employees from any and all claims that may arise from any injuries or mishap suffered by my child or ward during swim instruction. Further, I authorize the YMCA of Beaufort County to provide emergency care for any illness or injury to my child or ward, deemed necessary by qualified medical personnel. I grant the YMCA and its employees the right to take photographs of my child during youth sports involvement. I also give consent for the release of photos and my child’s name as deemed necessary for publicity and marketing purposes. By signing below, I acknowledge the aforementioned agreement.

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

**WARDLE FAMILY YMCA**

**Aquatics Director: Lou Bergen: [l.bergen@wardlefamilymca.org](mailto:l.bergen@wardlefamilymca.org) or (843)-522-8622 ext. 236**

**Head Coach: Taylor Lloyd [tdkeen15@gmail.com](mailto:tdkeen15@gmail.com)**

1801 Richmond Ave., Port Royal, SC 29935 • 843-522-9622 • beaufort-jasperymca.org