

Los Alamitos Divers
www.losaldivers.com

Lesson & Team Fee Schedule

Annual non-refundable admin fee

- Due January 1st and pro-rated monthly as of join date \$360
- Admin fee is per family

Annual Registration

USA Diving

- Novice \$ 40
- Junior Olympic (JO) \$200
 - Payable to USA Diving at <https://usadiving.webpoint.us/wp/Memberships/Join.wp>
 - Under Club Affiliation, choose “Southern Pacific” for Association and Los Alamitos Divers as your club
 - Coach of Record: Shane Butler

Amateur Athletic Union (AAU)

- Novice and JO \$ 14

Monthly Fees

Due and payable the 1st of each month and late (fee of \$25) after the 10th

- Lessons 1 day per week \$125
- Lessons 2 days per week \$200
- Novice team \$350
- JO team \$425

Coaches travel fees are split evenly between all divers attending the events. This includes transportation to and from event, hotel, and meals.

Fees may be made via Venmo, cash, or check.



www.divemeets.com will be used to sign up for most meets. Please create a profile and mark Shane Butler as your coach.

Los Alamitos Divers
3591 Cerritos Avenue, Los Alamitos, CA 90720
(562) 760-2719
losaldivers@gmail.com

Participant Waiver

Diver's Name _____ Date _____
Birth date _____ Lesson/Team Level _____
Street Address _____ City, State, Zip _____
Phone # _____ Alternate Phone # _____
E-mail _____
Mom _____ Dad _____

Los Alamitos Divers offers lessons and competitive teams. There are certain risks inherent in the use of equipment and/or participation in springboard diving that you should consider before you begin such activities.

As a participant in these programs, the undersigned on behalf of our minor dependent(s) and ourselves (collectively, "our") understand that participation can involve physical activity, which could result in injury. The undersigned also understands that use of the facilities is exclusively limited to the area(s) in which the lesson or team is being conducted and that use will be strictly under staff supervision.

For, and in consideration of, Los Alamitos Divers sponsoring these lessons and team programs, and Los Alamitos High School allowing use of its facilities for this program, and with the understanding of the risks involved in our participation, the undersigned on behalf of ourselves, our dependents and heirs agree to release and forever discharge Los Alamitos Divers and Los Alamitos High School and Los Alamitos Unified School District, their officers, directors, employees, contractors and agents from any and all liabilities, demands or claims for loss or damage resulting from an injury or damage which may be sustained on account of our participation in these lessons and/or team programs, or use of the facilities.

Print _____ Signature: _____ Date: _____
Diver's name Signature (parent if minor)

Emergency Medical Form

I the undersigned/or parent, or legal guardian of _____ ("Participant"), do hereby authorize and consent to Los Alamitos Divers, obtaining for the Participant any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital or emergency room care facility ("Medical Facility") care to be rendered to the participant under the general or special supervision of any member of the medical staff and emergency room staff licensed under the provisions of the Medicine Practice Act or a dentist licensed under the provisions of the Dental Practice Act and on the staff of any acute general hospital holding a current license to operate a hospital from the State of California Department of Public Health. It is understood that this authorization is given in advance of any specific diagnosis, treatment or Medical Facility care being required and, except as expressly limited below, is given to provide authority and power to render care which a Physician and Surgeon or Dentist in the exercise of his best judgment may deem advisable. It is understood that effort shall be made to contact the undersigned by telephone at the numbers listed below prior to rendering treatment to the participant, but that any of the above treatment will not be withheld if the undersigned cannot be reached. It is further understood that I (we) the undersigned are responsible for all charges for the abovementioned diagnosis, treatment or hospital care. This authorization is given pursuant to Section 25.8 of the Civil Code of California. Limitations (if any): _____

Date: _____ Signature: _____

THIS CONSENT SHALL REMAIN EFFECTIVE UNTIL: _____

MEDICAL INFORMATION:

Birth date _____

Last Tetanus Booster _____

CONTACT PHONE #:

Print Father's Name _____ Phone (____) _____

Print Mother's Name _____ Phone (____) _____

Physician: _____ Phone:(____) _____

Known Allergies to drugs or foods:

Carries an epi-pen? _____ Requires medication during practice? _____

Insurance Co: _____ Policy Number: _____

Any other medical information you wish to share?

Los Alamitos Divers
3591 Cerritos Avenue, Los Alamitos, CA 90720
(562) 760-2719
losaldivers@gmail.com

Registration

Name _____ DOB _____

Address _____ City, State, Zip _____

Phone # _____ Alternate # _____

Email _____

School _____ Grade _____

Parent/Guardian _____

Parent/Guardian _____

Address (if different) _____

Special needs that coach should be aware of:

By signing this form, I understand that fees are due and payable on the first of the month and late after the tenth of the month. I further agree to provide a written 30-day notice of intent to terminate my membership with Los Al Divers. I agree to keep my memberships with USA Diving and/or AAU Diving current for the entire time I am associated with Los Al Divers.

Signature of diver or parent if minor Date

I consent to pictures of my athlete being used on the Los Al Divers website and social media, including but not limited to Instagram, Facebook, and Twitter. Please sign next to the appropriate response.

Yes _____

No _____

Rules & Regulations

1. Team suits are to be worn at all meets. Once we solidify our team logo, suits will be available for purchase.
2. Transportation to meets is the responsibility of the diver/parent.
3. Meet registration is the responsibility of the diver/parent. The coach will assist in this process if needed.
4. Meet fees are the responsibility of the parent/diver.
5. At all home meets/home invitationals, parents are required to volunteer a minimum of 3 hours for the success of the meet. This may include, but is not limited to, assistance with registration, hospitality, scoring table/computer, announcing, set-up, breakdown.
6. *COVID regulations will remain in effect as directed by the county health department. All visitors on deck are required to wear masks and appropriately social distance.*

Code of Conduct

Each diver participating in training and competition as a representative of Los Alamitos Divers will act with decorum and respect for fellow athletes, coaches, parents, and officials. It is expected that athletes will remain committed to their academic achievement, as well as their athletic achievement.

Los Alamitos Divers will act responsibly, maintain self-control and decorum, be considerate of others, promote positivity, and display good sportsmanship.

Possession, use, and distribution of illegal substances, including alcohol tobacco/nicotine products under the age of 21 is strictly prohibited while training or representing Los Alamitos Divers.

It is expected that appropriate language will be used during practice and meets, and when speaking with fellow athletes/competitors, parents, coaches, officials, and volunteers.

Athletes will not practice if sick or injured. Makeups are allowed and expected for lessons.

Los Alamitos Divers prohibits discrimination, harassment, or bullying of any kind. If said behaviors occur, disciplinary action up to and including club dismissal will occur.

- If you feel that any of these behaviors have occurred, please report the offense(s) immediately to the coach.