WALDO COUNTY YMCA
Bluefish Swim Team
2025.2026 Welcome Letter

WELCOME TO THE WALDO COUNTY YMCA BLUEFISH!

The Waldo County YMCA's Bluefish Swim Team focuses on youth development, healthy living and social responsibility. Bluefish is affiliated with the National YMCA and participates in YMCA competition at the local, state, regional and national level. Bluefish Swim team members **MUST** be Waldo County YMCA Annual Members in good standing.

The WCY is committed to offering a high-quality swim team emphasizing the value of competition, challenging swimmers mentally and physically, as well as encouraging teamwork & sportsmanship. All while doing one's best. We expect the following from our swimmers:

- Be on time for practice, arriving on deck no more than 5 MINUTES prior to practice start.
- Arrive with the necessary equipment – **GOGGLES ARE A MUST**, swim suit, swim cap and a towel.
- Establish reasonable goals and practice to achieve those goals.
- Communicate goals, ideas, concerns and question with coaches.
- Respect the Waldo County YMCA facility and follow our facility rules and guidelines and do the same when visiting another organization while representing our Y.

ANNUAL MEMBERSHIP: Bluefish members must be **Annual Members in good standing of the Waldo County YMCA (WCY)**. This is a Y-USA regulation.

- An annual youth membership will be offered to all Bluefish Swim Team participants at 50% off. This must be paid in full, or with installments over the season (refer to the included payment schedule). This applies to both new and preexisting youth memberships.
- A new or existing Family membership may be paid in full or by monthly automatic draft. For any Bluefish Swim Team on a new or preexisting Family or Single Parent Family membership, we will discount the program fee by 20%.

FINANCIAL ASSISTANCE: The WCY does not turn anyone away due to financial circumstances. Please complete a Financial Assistance Request Form along with the rest of the registration packet. Our Membership Director, Jonathan Susee, will contact you to make sure that both membership and program participation are affordable for all.

Waldo County YMCA
157 Lincolnville Ave Belfast, Maine 04915
207.338.4598 | www.waldocountyymca.org
A 501 (c)(3) Charitable Organization.

Jeff Walls, Bluefish Head Coach
jwalls@waldocountyymca.org

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COACH RESPONSIBILITIES: Coaches are responsible for giving swimmers the tools and skills needed to do their best, teaching and train on the four major strokes – butterfly, backstroke, breaststroke and freestyle. They will help swimmers gain skills, knowledge and confidence including stroke mechanics, drills and building a swim workout. Coaches also emphasize good sportsmanship and team work.

Swimmers will be placed in practice groups based on skill and ability level. When in the best interest of the swimmer, he/she may be placed in a different group at the **coach's discretion**. Please **do not** register your swimmer or bring your swimmer to a practice that has not been specifically cleared by the coaches.

COMMUNICATION

1. SportsEngine Motion (previously TeamUnify): This is our team website where you can find our newsletters, swim meet sign ups, volunteer job postings, and updates. Coach can assist you in connecting to correct app.
2. **Email:** jwalls@waldocountyymca.org This goes to Jeff, our Aquatics Director/Head Bluefish Coach.
3. **In person: Please arrange a meeting ahead of time** to ensure coaches have time to focus their attention and truly hear your thoughts and suggestions. They cannot have conversations on deck as this takes away time from the youth swimmers.
4. **Swimmer Mailboxes:** Are located in a file box in the upstairs spectator area, please check them weekly. Swim meet ribbons and medals will be in here.

PHOTOGRAPHY: Our WCY waiver includes a photo/video release for promotional use. **During meets, photos/video may only be taken from the observation deck.**

KEEPING KIDS SAFE: If not directly participating in Bluefish, children 11 and under **MUST** be accompanied by an adult when in our building.

SWIM MEET EXPECTATIONS:

- Most meets are on Saturdays.
    - Dual meets = two-three teams / Invitational meets = multiple teams
- Swimmers are **ALWAYS** representing the WCY. Please act accordingly.
- Transportation to Away Meets is the responsibility of the caregiver.
- Meet Schedule is available on SportsEngine Motion and on our Bluefish Website page.
- Pack extra towels and warm clothes (cotton not recommended).
- Swimmers must sit with their team during meets.

VOLUNTEERING: It takes a lot of people to run a swim meet and your volunteer participation is **NEEDED AND EXPECTED.** There are many roles to be filled and the best place to see your swimmer is on deck. Please sign up on SportsEngine Motion for each meet.

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WALDO COUNTY YMCA BLUEFISH SWIM TEAM
PRACTICE GROUP DESCRIPTIONS AND PREREQUISITES

GREEN PREREQUISITE: Your swimmer must be able to pass our deep-water test and be six years of age. Swimmers need to be able to complete 25 yards of freestyle and backstroke to qualify for these groups. The green group skill level will practice 2x/week.

GREEN GROUP 1 PRACTICE: Mondays & Wednesdays 4:30 - 5:15 p.m.
For first and second year Bluefish swimmers who are focusing on improving freestyle, rotary breathing, backstroke and dives. Meet participation is recommended, not expected.

GREEN GROUP 2 PRACTICE: Tuesdays & Thursdays 4:30 - 5:15 p.m.
For swimmers who are proficient in freestyle and backstroke who will now be focusing on stroke development including, the Individual Medley (IM), flip turns and building endurance. Swimmers need a recommendation from a coach -OR- have competed with the Bluefish for a minimum of two seasons to join this practice group. Meet participation throughout the season, including the State Meet, is expected.

$300 (plus a Youth Membership) / $240 (plus a Family Membership)

RED PREREQUISITE: Your swimmer must be able to swim 50 yards continuously of freestyle and backstroke to join this practice group. This level focuses on stroke technique, introducing butterfly and breaststroke technique, interval training, and building endurance. This group is expected to practice minimally three times per week.

PRACTICE: Monday through Thursday 5:15 - 6:15 p.m.
Meet participation, including the State Meet, is expected.

**New Bluefish swimmers who are in Grades 6-12 are recommended to register for this practice group. Once acclimated to practices it's possible to switch groups.*

$460 (plus a Youth Membership) / $368 (plus a Family Membership)

BLUE PREREQUISITE: This is our highest level practice group. Swimmers must be legal in all four strokes, have the ability to follow work-outs independently and have a strong work-ethic. This group is for motivated athletes who have demonstrated their ability to keep up with the pace of workouts at this level. This group focuses on improving times and stroke efficiency. Swimmers are expected to commit to at least three practices per week, four would be preferred.

PRACTICE: Monday through Thursday from 3:00 - 4:30 p.m.
Swimmers are expected to participate in the majority of regular season meets.
Participation in the State Meet is expected.

$560 (plus a Youth Membership) / $448 (plus a Family Membership)

HIGH SCHOOL: This group is for swimmers who have demonstrated advanced commitment to the sport of swimming with the Bluefish swim team.

PRACTICE: Swimmers will be expected to attend a minimum of one (1) Bluefish practice per week.
Swimmers are expected to compete with us before and after their High School season.
Swimmers will join Blue Group practices as their season permits - see times above.
Participation in the majority of the regular season meets.
State Meet is expected.

$265 (plus a Youth Membership) / $212 (plus a Family Membership)

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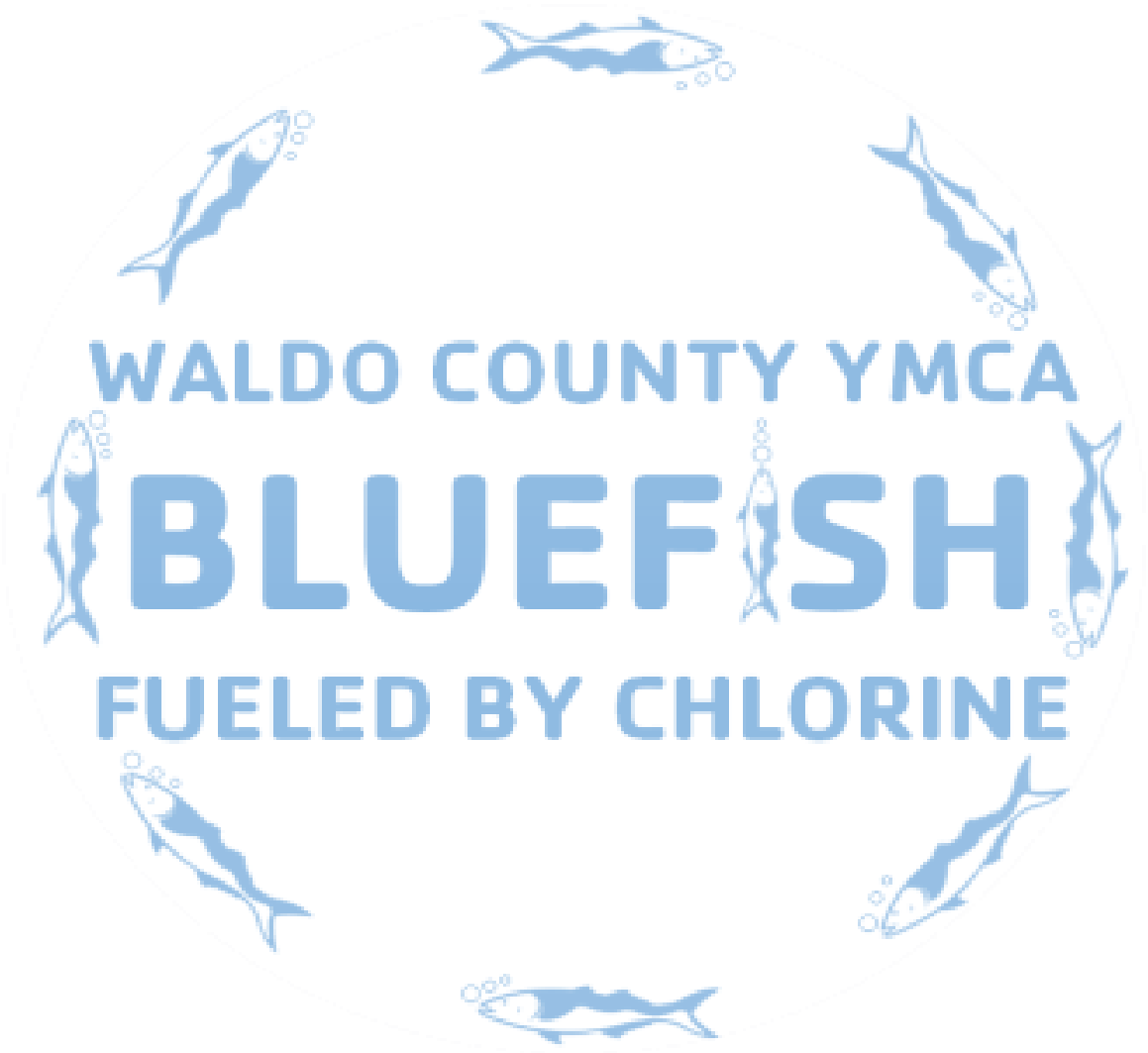

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the YMCA FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

WALDO COUNTY YMCA
2025.2026 Bluefish Swim Team Registration

Is the swimmer a current YMCA Member (circle): Y / N Member ID#_____

Annual Membership is required for Bluefish Swim Team participation.

Swimmer's Information

Swimmer's Name: _____ Age: _____

Gender: M / F Birth Date: ___/___/___ Current Grade: _____

Which practice group is the swimmer registering for?

☐ Green 1 ☐ Green 2 ☐ Red ☐ Blue ☐ High School

Unsure of practice group?
Please discuss with Coaches before registering.

Caregiver's/Emergency Contact Information

Please check box to share email → ☐ Yes, Please share my email with Volunteer Parent Group.

PRIMARY CAREGIVER CONTACT INFORMATION: Please provide email we should send information to.

Caregiver Name: _____ **Email:** _____

Address: _____ City: _____ State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

Employer: _____ Work Phone: _____

SECONDARY CAREGIVER CONTACT INFORMATION:

Please check if the secondary caregiver is authorized to make changes to childcare account ☐

Caregiver Name: _____ **Email:** _____

Address: _____ City: _____ State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

Employer: _____ Work Phone: _____

EMERGENCY CONTACT INFORMATION: Must be local and over age 16 with a valid state issued id.

Emergency Contact: _____ Relationship to Child: _____

Daytime Phone: _____ Cell Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Medical Information

Doctor's Name: _____ Phone Number: _____

Dentist's Name: _____ Phone Number: _____

Insurance Provider: _____ Policy Number: _____

Policy Holders Name: _____

Participant Signature *(parent/guardian if child is under 18)*: _____ Date: _____

Participant Waiver, Participant Pledge & Code of Conduct must also be signed.

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Waldo County YMCA Participant Waiver

FOR YOUTH DEVELOPMENT®
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FOR SOCIAL RESPONSIBILITY

NOTICE: THIS IS A LEGALLY BINDING AGREEMENT. Read this document carefully and in entirety. By signing this agreement, you give up your right to bring a court action to recover compensation or obtain any other remedy for any personal injury or property damage however caused arising out of your participation in Waldo County YMCA Programs, now or at any time in the future.

In consideration for being permitted to utilize the facilities, services, and programs of the Waldo County YMCA (hereinafter referred to as "YMCA") for any purpose, including but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the YMCA, without respect to location, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated programs have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use, or participation.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE YMCA, WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death of the undersign, whether caused by negligence of the releasees of otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with the YMCA, without respect to location.

THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE while in, about, or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA. THE UNDERSIGNED further expressly agrees that the forgoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Maine and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

As applicable per program participation:

√ I hereby authorize the employees of the YMCA to call emergency medical assistance and/or perform basic first-aid procedures that are necessary in the judgment of the YMCA. I hereby authorize qualified medical personnel to administer necessary anesthesia and medical treatment in the event of an accident. I understand that I am encouraged to discontinue any activity at any time I feel unable to continue.

√ I hereby authorize the YMCA to use photos and/or videos in promotional activities.

√ I hereby authorize the employees of the YMCA to administer medication. Important: medications can only be administered with the medication in the prescription bottle. Without the Physicians name and prescription on the label we cannot administer medications.

√ I hereby authorize the employees of the YMCA to assist in the application of Sun Block when necessary.

√ I hereby authorize the qualified employees (over the age of 21) of the YMCA to transport by bus or personal vehicle.

√ I hereby grant my child permission to attend field trips with the YMCA during the school year. Information will be sent home prior to each trip.

Contagious Disease Warning & Disclaimer: Waldo County YMCA in no way warrants that infection from any known or unknown contagious diseases will not occur through participation in Waldo County YMCA programs and activities of accessing Waldo County YMCA facilities.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

I Have Read This Release **PLEASE Print Name of Participant:** _____

Date: _____ Signature of Applicant: _____

Parent/Guardian Signature Necessary if participant is under age 18

Print Name of Signee: _____

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WALDO COUNTY YMCA
2025.2026 Bluefish Participation Pledge

As a Bluefish Swimmer, representing the Waldo County YMCA, I promise to:

Follow the pool and facility rules by:

- Walking on pool deck because running is dangerous to myself and others.
- Keeping my hands to myself and not engaging in horseplay.
- Using appropriate language and tone of voice at all times.
- Not eating on deck.
- Remain on deck during swim meets leaving only when necessary and with permission.

Follow the YMCA Core values of Caring, Honesty, Respect and Responsibility by:

CARING – I will consider the needs and feelings of others, and be courteous to those around me both on and off the deck. I will support my teammates by helping them in any way I can, by cheering them on and congratulating them after their swims.

HONESTY – I will be trustworthy, truthful, and leave with only what belongs to me.

RESPECT – I pledge to treat others *and myself* with dignity and respect. I will show respect to my teammates through my actions and attitude – I will speak kindly and support and encourage them as my teammates. I will show respect to coaches and lifeguards by following directions and speaking to them in an appropriate tone.

RESPONSIBILITY – I will put things back where I found them, and follow the guidance of the YMCA staff and volunteers. I pledge to be a role model for my peers and teammates by modeling positive and respectful behavior.

As a Bluefish swimmer, I promise to never participate in bullying and I promise to tell a Coach, a Lifeguard or an adult immediately if I see a teammate, a friend or another person get bullied.

I understand that if I choose not to follow any of the above rules that the Waldo County YMCA Disciplinary Policy may be applied at the discretion of the coaches.

As a Waldo County YMCA Bluefish swimmer, I agree to try my best to follow the above standards and represent my team with pride and respect.

Date: _____

Swimmer Signature: _____

Parent/Guardian Signature: _____

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WALDO COUNTY YMCA
2025.2026 Bluefish Parent/Guardian Code of Conduct

As a parent/guardian, I understand the important growth and developmental support that my child(ren)'s participation fosters. I also understand that it is essential to provide the coaching staff with respect and the authority to coach the team.

I agree with the following statements:

- I will set the right example for our children by demonstrating strong sportsmanship and showing respect and common courtesy at all times to the team members, coaches, competitors, officials, parents, and all facilities.
- I will get involved by volunteering (at least 1 parent per child at every home meet), observing practices, cheering at meets, ensuring that my child(ren) arrive at practice and meets timely with necessary fluid and equipment on hand, and talking with my child(ren) and their coach(es) about their progress.
- I will refrain from coaching my child(ren) from the stands during practices or meets.
- I understand that it is my role to be positive and civil at all time and that unfair or personal criticism, name-calling, and/or use of abusive language, gestures, and/or actions directed toward coaches, officials, volunteers, and/or any participating swimmer will not be tolerated.
- I will respect the integrity of the officials and their respective decisions.
- I will direct my concerns to:
    1. Bluefish Head Coach. Jeff Walls
    2. Aquatics Director, Jeff Walls
    3. CEO, Russell Werkman

I understand the above expectations and that my failure to adhere to them may result in an inability for me as a parent/guardian to participate in Bluefish swimming. My signature on this document certifies that I have read the Parent Handbook.

Caregiver 1 signature: _____ Date: _____

Printed name: _____

Caregiver 2 signature: _____ Date: _____

Printed name: _____

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WALDO COUNTY YMCA
Bluefish Swim Team
Payment Agreement and Payment Contract

FOR FRONT DESK USE

Member ID #_____

Total due: $_____ **Total Paid Today: $**_____ **Monthly Installments: $**_____

1. SWIMMER INFO

Name: _____

Bluefish Group: _____

Receive 50% off annual youth membership with Bluefish registration.
Receive 20% off Bluefish registration with annual family membership.

2. FINANCIAL ASSISTANCE

Will your family be applying for Financial Assistance? ☐ Yes ☐ No

3. ANNUAL MEMBERSHIP PAYMENT OPTIONS

☐ **WE HAVE AN EXISITING FAMILY MEMBERSHIP**

☐ **WE DO NOT HAVE A FAMILY MEMBERSHIP AND WOULD LIKE TO SIGN UP AND PAY IN FULL TODAY**

○ Annual Family $936 ○ Single Parent Family $684 ○ Youth $138 (50% off annual price)

☐ **WE DO NOT HAVE A FAMILY MEMBERSHIP AND WOULD LIKE TO SIGN UP FOR AUTOMATIC DRAFT.**

○ Annual Family $78/mth ○ Single Parent Family $57/mth ○ Youth $23 (6 payments included below)

4. BLUE FISH SWIM TEAM PROGRAM PAYMENT OPTIONS: Please select pay in full or pay in installments

YOUTH MEMBERSHIP Payment Schedule

☐ Pay in Full (with Youth Membership)

Bluefish Group	Bluefish Fee (with Youth Membership)	Youth Membership (50% off)	Pay in Full Total
Green	$300.00	$138.00	$438.00
Red	$460.00	$138.00	$598.00
Blue	$560.00	$132.00	$698.00
High School	$265.00	$132.00	$403.00

☐ Pay in Installments (with Youth Membership)

Bluefish Group	Initial Payment (October 28)	(5) Monthly Installments (Nov. 15 – Mar. 15)
Green	$125.00	$62.60
Red	$125.00	$94.60
Blue	$125.00	$114.60
High School	$125.00	$55.60

FAMILY MEMBERSHIP Payment Schedule

☐ Pay in Full (with Family Membership)

Bluefish Group	Bluefish Fee (20% off with Family Membership)	Pay in Full Total
Green	$240.00	$240.00
Red	$368.00	$368.00
Blue	$448.00	$448.00
High School	$212.00	$212.00

☐ Pay in Installments (with Family Membership)

Bluefish Group	Initial Payment (October 28)	(5) Monthly Installments (Nov. 15 – Mar. 15)
Green	$100.00	$28.00
Red	$100.00	$53.60
Blue	$100.00	$69.60
High School	$100.00	$22.40

I acknowledge that by my signature below I have read and accept responsibility for my payment requirements and understand that failure to meet these requirements will result in suspension of Bluefish privileges.

Parent/Guardian Signature_____ **Date** _____

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