

SOWAT

ShadowCliffs Open Water Aquatics Team

Visit our web site at: www.sowat-swimming.org

Join our e-mail list: groups.yahoo.com/group/SOWAT-swimming

Check your name on the Kiosk list: <http://sowat-swimming.org/EBRPD/Roster.php>

• Highlight of Team Rules

- Don't forget to sign in and out at the Kiosk
- You must wear your green SOWAT swim cap
- You must swim with a partner
- Team hours are 6:00am till 10:00am, 6:00pm till closing seven days a week
- On very hot days (temp over 100) the lifeguards will stay on duty past 6:00pm
SOWAT swimmers cannot swim until the lifeguards go off duty
- Members caught breaking rules or forging names to bring in non-members will lose SOWAT privileges

Yearly dues are \$30, good from June 1, 2009 to June 1, 2010.

Make checks payable to "SOWAT"

Mail checks and waiver to: Anita Rosen
1761 Pilgrim Ave
Mt. View, CA 94040

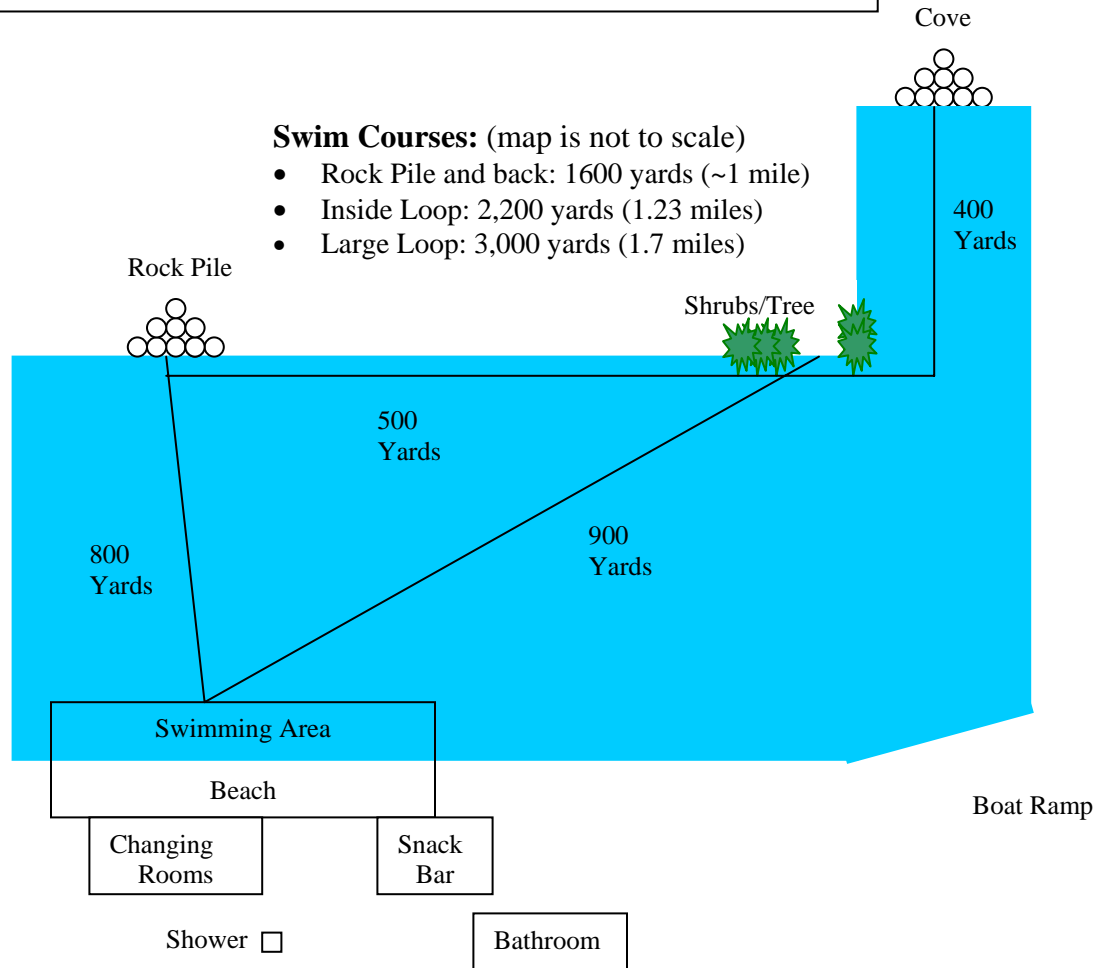
Please schedule a swim test for friends who are interested in joining SOWAT. The team allows everyone one free swim per season. The park will ticket untested swimmers. Members bringing untested swimmers past lane lines will lose all SOWAT privileges.

To schedule a swim test please contact:

Anita at 650-968-9382 or anitarosen@pacbell.net
Sue at 925-862-2928 or suehadley@yahoo.com
Dave at 925-606-0637 or dk@usa.net
Ron at 925-734-6016 or ronemhoff@comcast.net

Shadow Cliffs Open Water Aquatics Team

- \$30 a year to join – covers team insurance and caps
- Team hours 6:00am till 10:00am; 6:00pm till closing seven days a week



Swim Courses: (map is not to scale)

- Rock Pile and back: 1600 yards (~1 mile)
- Inside Loop: 2,200 yards (1.23 miles)
- Large Loop: 3,000 yards (1.7 miles)

- Contact information:
- Anita at 650-968-9382 or anita@readygo.com
 - Sue at 925-862-2928 or suehadley@yahoo.com
 - Dave at 925-606-0637 or dk@ltnl.gov
 - Ron at 925-734-6016 or ronemhoff@comcast.net

Highlights of Team Rules

- Don't forget to sign in and out at the Kiosk
- You must wear your green SOWAT swim cap
- You must swim with a partner
- Team hours are 6:00am till 10:00am; 6pm till closing seven days a week
- On very hot days (temp over 100) the lifeguards will stay on duty past 6:00pm **SOWAT swimmers cannot swim until the lifeguards go off duty**

Shadowcliffs Open Water Aquatic Team Rules

For the purpose of this document the Shadowcliffs Open Water Aquatic Team is referred to as SOWAT. The Shadowcliffs Regional Park is referred to as the Facility and the East Bay Regional Park district is referred to as the District. The By Laws of this corporation shall be as follows:

A) Membership - Because of the physically demanding nature of the proposed activity, membership in the SOWAT is open to those individuals demonstrating superior swimming ability. For the purpose of this organization superior is defined as the completion of a 1500 meter swim in less than 30 minutes or the ability to swim twice the width of Shadowcliffs lake unaided.

B.) SAFETY - Personal safety shall be the foremost consideration in usage of the Facility by all SOWAT members. All swims shall be performed on a "buddy" basis with two or more members swimming together or a boater in close proximity to each swimmer. Additionally all SOWAT members must wear a green SOWAT cap at all times when swimming in the Facility.

C.) HOURS - Facility usage by Club members will be determined through consultation with the District. It is proposed that the use of the Facility by SOWAT members be limited to the hours of 6:00am-10:00am, 6:00pm, until closing, Monday through Sunday during the months the Facility is open to the public. Members please note that Facility hours change with the change of available light.

D) AGE - The minimum age for membership in SOWAT shall be 13. Each club member who is a minor shall be "buddied" with an adult member when using the Facility.

E) CHECK IN PROCEDURES - SOWAT members are requested to comply with check in, check out procedure when using the Facility. The Kiosk at the entry to the Facility parking lot will have a clipboard with the names of all SOWAT members. Each individual is required to sign their name and note the time of arrival. Upon departure from the Facility each member must note their time of departure. The Facility asks that members do not block the Kiosk driveway while doing this.

F) DUES - Dues shall be set on an annual basis in accordance with the anticipated budgetary requirements for the Club. Initial dues shall be approximately \$30 a season. The SOWAT season will be from June 1 to June 1.

G) CAPS - All SOWAT members will be given a green SOWAT cap. You must wear your SOWAT cap to swim past the roped in area. Additional caps may be purchased for \$3.

H) RULE ENFORCEMENT - These rules and By-laws are intended to provide safety and manageability of the proposed activity. Non adherence to them may jeopardize the activity for all SOWAT members. A member's failure to comply with these BY-Laws will result in expulsion from SOWAT.

I) OFFICERS OF SOWAT - SOWAT will keep the District currently informed in writing concerning the names and addresses of their officers and directors. Such lists will be updated within ten (10) days following changes of the identity of any officers and directors.

J) WAIVERS - Each member of SOWAT will be required to complete a participant waiver form prior to using the Premises. A copy of the signed waiver will be provided to the District for each member of SOWAT. SOWAT members under the age of 18 will be required to submit a waiver signed by a parent or legal guardian.

Waiver of Liability

In consideration of the acceptance of my request for membership into the Shadow Cliffs Open Water Aquatic Team, hereafter referred to as SOWAT,

I agree to abide by all the rules and regulations of the East Bay Regional Park District (EBRPD) and SOWAT. I have received a copy of SOWAT club rules and regulations and agree to abide by these rules.

Applicants that are 18 years of age or less must obtain written parental consent on order to participate in SOWAT club activities.

I am aware that participation in the activities of SOWAT is potentially dangerous. I have been warned that I should not participate in this activity unless: 1) I am in excellent physical condition 2) I have previously completed a 1500 meter swim in under 30 minutes or I am able to swim one mile in open water continuously, without rest 3) I have been examined by a licensed physician and advised that I can safely participate in the training activities of SOWAT.

Knowing these facts, in consideration of acceptance into SOWAT, I hereby for myself, my heirs, my executors and administrators, waive, release and discharge the directors of SOWAT, the members of SOWAT, the directors and employees of the EBRPD and any successors or assigns from any and all rights, claims or liabilities for damage for any and all injuries to me or my property or for damage caused by me or to anyone else, arising out of or in connection with my participation on this activity

I further agree that I will defend, indemnify and hold harmless the directors of SOWAT, the members of SOWAT, the EBRPD and its employees, directors or its agents against all claims, demands or causes of action including court costs and attorney fees directly or indirectly arising from any or other proceedings brought by or prosecuting for my benefit contrary to this agreement.

This release extends to all claims of any kind and nature whatsoever, whether known or unknown and I expressly wave any benefits I may otherwise have under Section 1542 of the Civil Code of California relating to the release of unknown claims.

Name: _____ email: _____
(Printed)

Address: _____
(Parental Signature if under 18)

City, State & Zip Code: _____

Work Telephone: (_____) _____ Current date: _____

Home Telephone: (_____) _____ Birth date: _____

I have read the waiver and agree to follow the team rules. I understand that if I break the team rules I will loose my SOWAT privileges.

Signature: _____