



## **TISCA Water Polo North Region Insurance Information & Invoice**

The North Region wants all athletes to play and compete in a safe and insured environment. For 2012, the Dallas Water Polo Club purchased insurance to cover teams for both competitions and practices. Below are the details on the insurance parameters for Spring 2012.

**Insurance Costs:** The cost for insurance will be \$10 per athlete (no fees for coaches or officials). \*Teams will need to provide the names of all athletes for each school to [joelinehan@earthlink.net](mailto:joelinehan@earthlink.net) AND pay \$10 per athlete by March 23<sup>rd</sup>. Please make checks payable to Dallas Water Polo Club.

### **Exceptions:**

- **Exception #1**-Teams DO NOT need to pay the insurance if their school provides insurance for the water polo program. All schools and school districts are different. Coaches need to ask their athletic directors if the water polo program falls under the athletic insurance policy. Many Texas area high school water polo programs are considered an extension of the swim team and thus fall under the same insurance as the swim team. Teams which fall under the school district's athletic insurance policy OR have alternate insurance do NOT need to email their rosters for insurance purposes.
- **Exception #2**-If you have players who are currently registered with USA Water Polo as Silver or Gold members (for 2012), the \$10 does not need to be paid for these athletes. When coaches provide the rosters to Joe Linehan for insurance purposes, please indicate who on the roster has a USA Water Polo current membership.

\*When submitting rosters please list athletes alphabetically with separate lists for boys and girls (note which ones are USA Water Polo registered). Please list/pay for all athletes who will practice AND play in a competition this spring.

*For additional questions please contact Joe Linehan at 713-705-0945 or email to [joelinehan@earthlink.net](mailto:joelinehan@earthlink.net).*

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### **TISCA Water Polo North Region Insurance Invoice**

**Cost:** \$10 per athlete

# of boys \_\_\_\_\_ # of girls \_\_\_\_\_

Total # of athletes \_\_\_\_\_ X \$10

Total Cost \$ \_\_\_\_\_

**Make checks payable to:**  
**Dallas Water Polo Club**

**Send to:**  
**Dallas Water Polo Club**  
**c/o Joe Linehan**  
**7750 N. Macarthur Blvd #120-275**  
**Irving, TX 75063**