

2010

Jr. Competitive Swim
Gregory Health and Wellness Center
USC Lancaster

2011



*Instruction for boys and girls, Ages 7 and under *Develop Proper Stroke Techniques and Stamina *Diving Instruction *Competitive Start *Develop competition *Style of swimming *Instructed by USCL's Aquatics Director Anne H. Small and Staff *Classes meet Tuesday and Thursday 2:15-3:15pm
*Each session is limited to 16 participants

PREREQUISITE

- Must be able to swim one length of 25 meter pool using freestyle (face in the water, breathing to the side) and backstroke without hesitation.

REGISTRATION

New participants:

1. A parent must accompany each participant at time of registration, Mon.-Thurs. 3:30-5:00pm.
2. All new Competitive Swimming participants will be asked to demonstrate their water skill and pass the prerequisite in order to register for the class.
3. Please bring swimwear, goggles and towel to registration.

Returning participants:

1. Do not have to do the prerequisite.

Registration will occur on a first come serve basis

REGISTRATION/SESSION SCHEDULE

Registration Begins

Aug. 16, 2010
Sept. 20, 2010
Oct. 25, 2010
Dec 6, 2010
Jan. 31, 2011
Mar. 7, 2011
Apr. 4, 2011

Session Dates:

Aug. 24 - Sept. 16
Sept.28 – Oct. 21
Nov. 2 – Dec 2
Jan 4 – Jan 27
Feb. 8 – Mar. 3
Mar. 15 – April 7
April 12 – May 26***

FEES:

Individual Sessions:

First Child : \$50.00
Subsequent : \$45.00

April 12- May26:***(6 week session)

First Child: \$75.00
Subsequent: \$70.00

*In December the office will be closed for the holidays, check closings so you won't miss registration.

**Children MUST present their swim card to the entry clerk EACH day to participate in class.

**No one should be entering the pool through the outside double doors or the hallway doors for security purposes.

Jr. Competitive Swimming Registration Form

Child's Name _____ Birthdate _____

Parent's Name: _____

Address _____ Phone _____ Cell _____

City _____ State _____ ZIP _____

In what county do you presently reside? _____

Ethnic Background: () Caucasian () African American () Asian () Native American () other

Sex () M () F

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PLEASE CHECK THE SESSION YOUR CHILD/CHILDREN WILL ATTEND:

___ Aug 24 -Sept 16 ___ Sept. 28 – Oct. 21 ___ Nov 2 – Dec 2 ___ Jan. 4 – Jan. 27
___ Feb. 8 – Mar 3 ___ Mar. 15 – Apr. 7 ___ Apr. 12 – May 26***

RELEASE

I realize that my child's participation in this activity is a privilege extended by the University of South Carolina-Lancaster. In exchange for the privilege of participation, I hereby agree for myself, and for any other persons, to release, waive and discharge any right to lawsuit against the University, its facility, officers, agents, or employees for bodily, injury, damage my property, or wrongful death that might arise out of participation in this activity whether caused by negligence, gross or otherwise. I acknowledge that I have read the foregoing paragraph and am fully aware of the legal consequences of signing this instrument. Please understand that we can not control inclement weather. However, we will do our best to make up any missed class time, due to inclement weather, **within the dates of scheduled classes.**

Signature of parent or legal guardian

Date

- **Refund requests will only be honored if accompanied with a written medical excuse.**
- **Children MUST present their swim card to the entry clerk each day to participate in class.**
- **No one should be entering the pool through the outside double doors or the hallway doors for security purposes.**