



# FULTON FINS SWIM TEAM

**Ages: 5 – 18** \*Children MUST be 5 years of age by June 1<sup>st</sup> AND be able to swim the width of the City swimming pool.

**Registration Fee:** \$75 for the first child in a family, \$70 for the second child, & \$65 for each additional child.

**Coaches:** Sara McDaniel & Agnes Hatcher

**Registration Deadline** - May 10<sup>th</sup>

**PRACTICE SESSIONS:** First Practice: May 29<sup>th</sup>

### The Following are Class Divisions and Times:

**\*Sign-up for the class you were in last year.\***

- \_\_\_ **SHARKS (A), 8:45– 9:45 AM:** Swimmers must know all 4 competitive strokes, flip turns and competitive diving starts. Swimmers swim up to 500 meters at one time.
- \_\_\_ **MINNOWS (B), 9:45–10:15 AM:** Swimmers must be able to swim the width of the pool freestyle. Class instruction includes freestyle and backstroke technique and endurance. Technique of fly and breast may be introduced.
- \_\_\_ **DOLPHINS (AB), 10:15–11:00 AM:** Swimmers must be able to swim 50 meters of both backstroke and freestyle. Class instruction includes free and back endurance, techniques of butterfly, and breaststroke.
- \_\_\_ **BARRACUDAS (I), 11:00–11:45 AM:** Swimmers must know all 4 competitive strokes and have proper technique. Class instruction includes flip turns and dives. Swimmers swim up to 200 meters at one time.

**\*All Classes held Monday, Tuesday, Thursday, & Friday.\***

NAME: _____					DATE OF BIRTH: _____				
Address: _____					Age (as of June 1st) : _____				
Did you participate last year ? _____					Male _____ Female _____				
Shirt Size: _____		YS	YM	YL	AS	AM	AL	AXL	AXXL
Parents/Guardian: _____									
Home phone: _____			Day phone: _____			E-Mail: _____			
Emergency Contact: (other than parent) _____						Phone: _____			

#### LIABILITY WAIVER

As a parent/guardian, I assume all risk associated with this sports participation and the participant and I agree to hold the City of Fulton, the Parks and Recreation Department and its employees, agents, representatives coaches and volunteers harmless from any and all liability actions, causes of actions, debts, claims or demands of any kind and nature whatsoever which may arise by the participation in this program under the direction of the Parks and Recreation Department and/or the City of Fulton. The terms hereon shall serve as a release as well as an assumption of risk by the participant, the parents or legal guardians, all heirs, all family, estate, executor, administrator and all assignees, if any.

**Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*\*\*\* For Office Use Only \*\*\*\*\*

Amount Paid: \$ \_\_\_\_\_

Date: \_\_\_\_\_

Staff: \_\_\_\_\_