



HIGH SCHOOL/SUMMER PREP WORKOUT

CUB RUN REC CENTER, CHANTILLY - Ages 9 & Up

(No meet entry fees)

Due to many requests, we have added additional workouts for High School and Summer Prep training at Providence Recreation Center for our upcoming 2010-2011 swimming season. These workouts will involve two evenings per week for (1) Fall/Winter (2) Winter/Spring or (3) Fall-through-Spring training.

Coaches: Scott Brown, Nancy Monaghan

Program #1		Ages 9-18 years	
	Code:	CR2B (Cub Run)	
	Dates:	Tues/Thurs - Sep 14, 2010 to Jan 13, 2011	8:00-9:00PM
	Cost:	Swimming Dues	\$655
		USS Registration	\$ 80
	★ Due at Registration \$735		

Program #2		Ages 9-18 years	
	Code:	CR2C (Cub Run)	
	Dates:	Tues/Thurs - Jan 18, 2011 to May 19, 2011	8:00-9:00PM
	Cost:	Swimming Dues	\$655
		USS Registration	\$ 80
	★ Due at Registration \$735		

Program #3		Ages 9-18 years	COMPLETE PROGRAM
	Code:	CR2D (Cub Run)	
	Dates:	Tues/Thurs - Sep 14, 2010 to May 19, 2011	8:00-9:00PM
	Cost:	Swimming Dues	\$1,180
		USS Registration	\$ 80
	★ Due at Registration \$1,260		

Families with multiple swimmers may request two payments.

Registration Information: Janet Brumbaugh (703) 536-6338

Mail registration to: Janet Brumbaugh
2215 N. Powhatan St.
Arlington, VA 22205

- Those that choose the High School/Summer Prep **have no meet entry fees & therefore are not eligible to enter USS meets or team social events throughout the season unless noted.**
- All participants will receive a team tee shirt and cap.

All Info: www.yorkswim.com



HIGH SCHOOL/SUMMER PREP WORKOUT REGISTRATION FORM

CUB RUN or PROVIDENCE - Ages 9 & Up

Mail registration & check to: Janet Brumbaugh
2215 N. Powhatan St.
Arlington, VA 22205

PARENTS

Last Name: _____ First Names: _____
Street: _____ City: _____ State: _____ ZIP: _____
Home Phone: _____ Father: _____ Mother: _____
Email: _____ Summer Club: _____ # of Family Swimmers: _____
Total Annual Swimming Dues: _____ Payment Enclosed: _____

SWIMMERS

Last Name: _____ Summer Club: _____

First Name, Middle Initial	First Name, Middle Initial	First Name, Middle Initial
1) _____	2) _____	3) _____
DOB: _____ Age: _____	DOB: _____ Age: _____	DOB: _____ Age: _____
Workout: _____ Sex: _____ (CODE)	Workout: _____ Sex: _____ (CODE)	Workout: _____ Sex: _____ (CODE)

ASSUMPTION OF RISK AND RELEASE AGREEMENT

In consideration of acceptance of the above for membership in the York Swim Club, the undersigned assumes full responsibility for any injuries, damages or losses which may occur to members or member's property, and hereby releases and discharges York Swim Club and its officers, agents, members and any persons assisting in its activities and functions, and the owners and agents of any of the facilities used by York Swim Club, from any and all claims, demands, rights of action or causes of actions, present or future, whether known, anticipated or unanticipated, resulting from or arising out of members participation in its activities and functions.

DATE: _____ PARENT SIGNATURE: _____

USA SWIMMING

2011 ATHLETIC REGISTRATION APPLICATION

LSC: POTOMAC VALLEY SWIMMING

PLEASE PRINT LEGIBLY COMPLETE ALL INFORMATION

REGISTRATION DATE OFFICE USE ONLY _____

LAST NAME: _____ LEGAL FIRST NAME: _____ MIDDLE NAME: _____

DATE OF BIRTH: MO _____ DAY _____ YR _____ SEX: M F AGE: _____ PREFERRED NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____ - _____

AREA CODE: _____ TELEPHONE NUMBER: _____ FAMILY EMAIL: _____

CLUB NAME: YORK NAME OF CLUB YOU REPRESENT: YORK SWIM CLUB

OTHER SWIMMING AFFILIATIONS

(check all that apply)

- 0. Junior High School
- 1. Senior High School
- 2. YMCA/YWCA
- 3. College
- 4. Summer Swim League
- 5. Masters
- 6. Disable Sports Organization
- 7. Water Polo
- 8. None

ETHNICITY

Bureau guidelines, you may make up to two choices if appropriate):

- Q. African American
- R. Asian or Pacific Islander
- S. Caucasian
- T. Hispanic
- U. Native American
- V. Other
- W. Decline

U.S. CITIZEN?

YES _____ NO _____

DUAL CITIZEN?

YES _____ NO _____

IF DUAL CITIZEN OR NON-CITIZEN ARE YOU A MEMBER OF ANOTHER FINA FEDERATION?

YES _____ NO _____

You must complete this form
And return it with your York Registration

If Joining to participate in a learn to swim program, please check here

YEAR LAST REGISTERED _____, IF YOU REGISTERED WITH A DIFFERENT USA SWIMMING CLUB IN 2010 ENTER THAT

CLUB CODE _____ LSC _____ AND THE DATE OF YOUR LAST COMPETITION REPRESENTING THAT CLUB ____/____/____.

SIGN HERE: x _____ (SIGNATURE OF ATHLETE PARENT OR GUARDIAN)

ORDER FORM
2010-2011 York Swim Club

All swimmers who register with York Swim Club will receive a:
Free York Swim Club Team T-Shirt and a Team Competition Swim Cap

T-shirt(s) and cap(s) will be distributed at practice in early October. Incomplete or missing order forms will delay or exclude your swimmer from receiving apparel.

LAST NAME: **PHONE #:**

Complete information for EACH swimmer, include swimmer's name, practice group, and t-shirt size.

SWIMMER'S FIRST NAME	SIZE OF T-SHIRT (Please circle size)	WORKOUT CODE
	YL AS AM AL XL XXL	
	YL AS AM AL XL XXL	
	YL AS AM AL XL XXL	
	YL AS AM AL XL XXL	

PLEASE RETURN COMPLETED FORM WITH REGISTRATION FORM!

