FOREST PARK 2020 SPRING CLINICS

We are pleased to be able to offer spring stroke clinics at Forest Park Swim Club again! We offer options of 2, 3 or 4 days a week, **Monday** through **Thursday**.

The first day of clinics is March 2nd ; they run for **5** consecutive weeks. Last day of clinics is April 2nd . Prices have been adjusted to reflect an extra week this year.

Swimmers need to regain feel for the water after being out for several months. Our focus is strictly on technique. 1 week spent on each stroke; starts/turns mixed in.

The goal of our clinics is to get experienced swimmers ready for the season, and for getting new swimmers ready to join the team. We are NOT a learn-to-swim program.

In order to provide the swimmers with a small swimmer-to-coach ratio, we limit the total number of swimmers. Due to coach availability, Wednesday sessions have a lower maximum. Please be aware, we may need to reschedule the final day Thursday 4/2***.*** Payment is due in full by March 4. See payment info below.

Participants must be in good standing with the pool/team. Unpaid balances from 2019 must be brought current.

Child 1:

Name Age as of 6/15 /20 Group Preferred Days/Time

Child 2:

Name Age as of 6/15/20 Group Preferred Days/Time

Child 3:

Name Age as of 6/15/20 Group Preferred Days/Time

Parent’s name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FEES: \_\_\_\_\_\_\_\_\_

(group/days per week total)

Contact Number(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Discounts:

Member - yes / no

Family Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sibling - yes / no

TOTAL: \_\_\_\_\_\_\_\_

Please pay before clinics start to reserve your spot! Please use our VENMO @JessicaSteffensen (flyer logo on the VENMO) put a note in who the payment is for & for what days. Also email info to [forestparkclinics@gmail.com](mailto:forestparkclinics@gmail.com) Checks are accepted made out to FPSA on the first 4 days of clinics only. Square credit card payments may also be made first 3 days of clinics (2.6% fee)

Please email [forestparkclinics@gmail.com](mailto:forestparkclinics@gmail.com) ASAP and let us know which Group and which Days/time for your swimmer(s) so I can save your slot.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Group 1 | Group 2 | Group 3 | Group 4 | Group 5 |
| Ages | 3-5/New | 4-7 | 6-8 | 9-12 | 10-14 |
| **Level** | New to swimming. Willing to learn. Potty-trained.  *Very* limited space….. | Has done 25 free between 30 and 60 seconds.  Willing to/can swim on back. | Has done 25 yards free under 30 seconds. Can do other 3 strokes. | New to/needs turn work.. | 50 freestyle under 40 seconds.  All other 50’s under 55 seconds. |
| **\*Time**  **Slot** | 4:45-5:15  Days based on availability | 5:15-6:00  *or*  6:45-7:30 | 5:15-6:00  *or*  6:45-7:30 | 6:00-6:45  *or*  6:45-7:30 | 6:00-6:45  *or*  6:45-7:30 |
| **Max swimmers**  **Per coach** | 1 | 2-3 | 3-5 | 4-6 | 4-6 |
| **Clinic**  **Points**  **Of**  **Emphasis** | Mostly will stay in small pool (not baby pool). We will teach them to be water-safe as well as work on kicking and breathing/bubbles.  Depending on the swimmer, they may be moved to main pool for part of their lesson. | Will do 25-yards at a time. Working on freestyle and backstroke technique. We will teach them the basics of the other two strokes as well. Dives will get work 1-2 times a week. | Will do 25-yards at a time. Work on advanced techniques for all 4 strokes as well as I.M. turns. Turns/Dives will get work 1-2 times a week | Will do 25-50 yards at a time.  We will work on advanced techniques for all 4 strokes as well as I.M. turns. Starts/turns will get work at least once a week. | Will do mostly 50 yards at a time. Advanced techniques for all 4 strokes as well as I.M. Starts/turns will get work at least once a week. |
| Also, unless it’s a one-time occurrence, please refrain from changing time slots without giving prior notice as we will have different coaches for afternoon than we have for evening. | | | | | |

**\*Note: We are combining the night groups into ONE session; swimmers will still do different practices**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Days | Group 1 | Group 2 | Group 3 | Group 4 | Group 5 |
| 2 | $130 | $180 | $180 | $180 | $180 |
| 3 | $170 | $230 | $230 | $230 | $230 |
| 4 | $195 | $265 | $265 | $265 | $265 |

Multi-Swimmer Discount: Take $15.00 off for 2nd child’s price and

$20.00 for a 3rd child.

Pool Member Discount: Take $15.00 off for each child.

(use age as of 6/15/2020)

Spring Clinic Rules

•Parents please refrain from interrupting the coaches or the swimmers during clinics. The swimmers need to be allowed to swim and the coaches need to be allowed to coach.

•Please pick up after yourselves. Our pool is not open for general use during this time of the year. The more mess is left, the more the coaches have to clean up!

•If other, non-swimming children are present during their siblings’ clinic, please monitor them closely. We have a large grass area to play in but the coaches cannot be responsible for what goes on there.

•The baby pool is off limits.

•Absolutely NO running on deck.

•NO horseplay in or out of the pool is allowed.

•Do not enter the water until your coach is ready for you. When your clinic is over, please get out of the water immediately.

•Our coaches are on very tight time schedules. They need to leave as soon as the clinics are over for the day. Please do not be late in picking up your child. If you must leave your child there during his/her clinic, please arrive promptly when it is over to pick them up. Since the coaches are often in the water with our clinics, we cannot be responsible for swimmers who are out of the water unsupervised.

•If you wish to speak with one of the coaches, please do so before or after your group.

The coaches need to be able to run their groups free of distraction.

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

In consideration of membership for the persons (herein referred to as “swimmers”) named below on the Forest Park Swimming Association (FPSA) swim team and their being permitted to enter and use (the property) herein defined as included but not limited to the driveway entrance and all the walkways, grounds, buildings and other areas appurtenant to the FPSA swimming pool including the pool itself for any swim team purpose or activity, each of the undersigned for himself, his personal representatives, heirs, and next of kin, acknowledges, agrees and represents that he has or will immediately upon entering any such areas, and will continuously thereafter, inspect such areas and all portions thereof which he enters and with which he comes into contact and he does further warrant that his entry upon such area or areas constitutes acknowledgement that he has inspected such areas and that he finds and accepts the same as being safe and reasonably suited for swim team purposes or activities, and he further agrees and warrants that if at anytime that he is in or about any areas and he feels anything to be unsafe he will immediately so advise the lifeguard or other responsible adult.

1. The undersigned parent or legal guardian HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the Forest Park Swimming Association owners and leasees of the property and each of then their officers and employees all for the purpose herein referred to as “releasees”, from all liability to the undersigned, his personal representative, assigns, heirs, and next of kin for any and all loss or damage, and any claim or demands therefor on account of injury to the person or property resulting to the swimmers named below whether caused by the negligence of the releasees, or otherwise while the swimmers named below are involved or participating in any swim team purpose or activity on or off of the property.
2. The undersigned parent or legal guardian HEREBY AGREES TO INDEMNIFY AND HOLD HARMLESS the releasees and each of them from any loss, liability damage, or cost they may incur while the simmers named below are involved or participating in any swim team purpose or activity on or off of the property whether caused by the negligence of the releasees or otherwise.
3. The undersigned parent or legal guardian HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE due to the negligence of releasees or otherwise while the simmers names below are involved or participation in any swim team purpose or activity on or off of the property.
4. The undersigned parent or legal guardian HEREBY ACKNOWLEDGES that some competitive events are held at properties not owned or controlled by FPSA and that there may or may not be insurance carried on those properties by their owners or operators. Furthermore, the undersigned parent or legal guardian consents to the participation of the swimmers named below at those facilities despite that fact.
5. The undersigned parent or legal guardian HEREBY ACKNOWLEDGES that the insurance policy currently in effect for the FPSA does not provide any protection for the swimmers named below while they are involved in, being transported to, or participating in any swim team purpose or activity away from the property. Furthermore, The undersigned parent or legal guardian consents to their involvement in, transportation to, or participation in any swim team purpose or activity despite that fact.

The undersigned parent or legal guardian expressly acknowledges and agrees that competitive swimming and diving are activities in which there are substantial risks of head and neck injuries or drowning etc., all of which involves the risk of serious injury and or death and or property damages. The undersigned parent or legal guardian further expressly agrees that the foregoing release waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the law of the State of California and that if any portion thereof is held invalid it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

The UNDERSIGNED PARENT OR LEGAL GUARDIAN HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducements apart from the foregoing written agreement have been made.

## PARENT’S SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*Swimmers covered by this agreement are listed on the first page.**