

SWARTZ CREEK GIRLS and BOYS SWIM AND DIVE CAMP

Summer Skills Camp 2009

Who: Swim Camp- Grades 4-12
Dive Camp- Grades 9-12

Place: Swartz Creek Middle School Pool

Date: Swim Camp - July 27-31, 2009
7th - 12th : 8:00 am - 9:45 am
4th - 6th : 9:45 - 11:00 am

Dive Camp - July 20-24, 2009
All divers: 8:00 am - 11:00 am

Cost: \$55.00

Please return the registration form by June 12, 2009 to:
Swartz Creek High School
Attn: Athletic Office
1 Dragon Drive
Swartz Creek, MI 48473

Make checks payable to: Swartz Creek High School

Camp Includes:

- Camp T-shirt
- Individualized instruction focusing on fundamentals
- Learning and fine-tuning stroke drills, starts, turns, and finishes
- Learning and improving diving approaches, techniques, and entries

The Swim and Dive Programs focus on the development of:

- Fundamental skills
- Proper nutrition
- Positive attitudes
- Teamwork

Camp Directors:

Carrie Church

Varsity Swim Coach, four seasons with the team
Four-year letter winner at Alma College
MIAA Championship Finalist in breaststroke and IM
Certified in WSI, Lifeguarding, and CPR

Brad Benn

Varsity Swim Coach, six-plus seasons with the team
Has coached state-qualifying athletes
Certified in WSI, Lifeguarding, and CPR

John Maxwell

Varsity Dive Coach
20+ years coaching high school diving
Coached numerous State and Regional finalists
1994 Class "A" Coach of the Year
Safety Training at U of M Ann Arbor under Dick Kimball
Certified in WSI, Lifeguarding, and CPR

Questions?

Call Coach Church (810)591-1841
or Coach Maxwell (810) 342- 8305

Discounts may apply if a camper is also enrolled in summer swim lessons. Contact Community Ed. for info.

Please return this portion with payment.

2009 Swartz Creek Swim and Dive Camp Registration

Name: _____

Phone:() _____

Grade (as of Fall 2009): _____

Circle One: SWIM CAMP DIVE CAMP

T-Shirt Size: Youth S M L XL

Adult S M L XL

Parental Permission:

I give my permission for my son/daughter to attend the 2009 Swim or Dive Camp. In case of emergency, I hereby authorize Representatives of Swartz Creek to act for me according to their best judgment in an emergency requiring medical attention. I have no knowledge of any medical impairment that would be affected by the above named camper's participation.

Parent Signature: _____

Date: _____

Home Number:() _____

Cell Number:() _____

Emergency Contact (name and number):

() _____

Other info: _____

