

Summer Swim Team 2017!

The KFSC swim team season will begin on Monday, April 17th. Until school is out, practices will be in the evenings, and swimmers must attend a minimum of 2 practices a week. Once summer vacation has begun, practices move to the morning, and swimmers must attend at least 3 practices each week. Swimmers are assigned to practice groups based on age and ability. The team participates in the Silicon Valley Swim League with meets on Saturdays starting June 3rd until July 22nd. Returning 2016 swimmers may register for this year's program by returning the form below and the appropriate fees by April 12th, 2017.

FIRST TIMER TRYOUTS: - New swimmers must demonstrate their swimming skills to the coach; therefore mail-in registration is not an option for new swimmers. Try-outs will be held on a walk-in basis.

1. Bring your swimmer during any of these time slots:

Friday April 7th, 3:30 – 5 pm

Saturday, April 8th, 1:45 – 3 pm

Sunday, April 9th, 1:45 – 3 pm

2. Please complete and bring the form (below) with you.

Swimmers who are 8 or younger must be able to swim freestyle and backstroke, in deep water, a distance equal to the width of the pool. Those who are 9 and older must be able to swim a full length (25 yds) of the pool in both freestyle and backstroke and demonstrate knowledge of either breast-stroke or butterfly.

Work-out groups and schedules will be posted outside the pool gate on April 10th.

Parent participation is vital to a successful program. At least one parent is expected to work at meets in which their child participates. Additionally, parent volunteers are needed throughout the season to help with a variety of team activities. Team members must also participate in the Aqua-Thon fund raiser.

Swim team fees are: **KFSC members--\$150/child** **Non-KFSC members--\$300/child**

Questions about the team should be directed to head Coach Ann Liebmann. Please leave a message for her at 408-241-3609; be sure to include your name and phone number.

KILLARNEY FARMS SWIM TEAM REGISTRATION - Summer 2017

FAMILY NAME _____ PHONE NO. _____

FATHER _____ MOTHER _____

ADDRESS _____
NUMBER and STREET CITY ZIP CODE

EMERGENCY CONTACT (name and phone number) _____

SWIMMER(S):

NAME _____ BIRTHDATE _____

NAME _____ BIRTHDATE _____

NAME _____ BIRTHDATE _____

NAME _____ BIRTHDATE _____

EMAIL (for reminders, bulletins, etc.): _____