

2009 \$TREAKS' SWIM CAMP

AGE: 11 and older (age determined by July 12th, 2009.)

STAFF: The camp will be directed by GHS varsity coaches
Ray VanHootegem and Amanda White

LOCATION: The camp will be held at the GHS Mustain pool.

DATE: July 13th July 17th, 2009.

TIME: 8:00a.m.- 10:30a.m. (Mon. thru Fri.)

EMPHASIS: The swim camp will emphasize the basic skill needed for the swim team: intense workouts, stroke work, starts, turns, and overall team development. Our goal is for participants to gain a good understanding of a high school swimming program and encourage swimmers to join the high school swim team.

COST: Camp tuition before July 10th, 2009 is \$40.00; Camp tuition after July 10th is \$45.00 (t-shirt included)

NAME _____ **PHONE** _____

ADDRESS _____ **CITY** _____

AGE _____ **Year in School** _____ **T-Shirt Size** _____

_____ I am enrolling before July 8th and have enclosed \$40 in tuition (2nd child at \$30)

_____ I am enrolling after July 8th and have enclosed \$45 in tuition (2nd child at \$35)

ENROLLMENT DEADLINE IS FRIDAY JULY 10th, 2008.

In and for my son/daughter's participation in the streaks' camp, I hereby agree and promise that I will not hold District #205 streaks' camp or the staff responsible for any loss, damage, or personal injuries that she may receive as a result of participation. I understand that the swim camp does not provide medical insurance. In addition, I acknowledge that I have insurance to cover medical expenses of my child. My child is in good health and I hereby grant permission for him/her to participate.

Parent or Guardian's Signature _____

Phone during camp hours _____

**Return to: Coach Ray VanHootegem, 522 Edwards Ave., Galesburg Illinois 61401.
Make checks payable to GHS Swimming. If you have any questions call Ray at 342-0599 or Amanda White 847-772-8388.**