



# HIGH SCHOOL FALL SWIM GROUP

**Overview:** 8<sup>th</sup>\*\* – 12<sup>th</sup> graders. Ten week intensive training program designed to prepare swimmers for the high school swim season. Focus is on technical development of the four competitive swim strokes, aerobic training, and race strategies specific to high school swimming. Swimmers need to wear athletic shoes to practice as we will be conducting dryland training also. Open to BSRC members AND a **limited** number of nonmembers.

\*\*8<sup>th</sup> graders will be accepted if space is available after all 9-12 grade registrations have been processed.

**Dates:** 10 Weeks/ September 3rd-November 9th-No practice on Labor Day Monday, September 2th

**Training Days and Times:**

**Evenings:** Monday, Tuesday and Thursday 7:00-8:30 p.m.

**Morning:** Saturdays 8:00 a.m.-9:30 a.m.

**Coaches:** BSRC Aquatic Director Will Brunner  
BSRC Head Coach Karen Seeber  
Saint Gertrude High School and Benedict Head Coach Denis Schmidt  
Coach Kelly Hargreaves

**Equipment:** Goggles and caps (if necessary).

<b>Cost:</b> Members:	<b>601</b>	\$153.00	\$143.00 for each additional sibling.
Nonmembers:	<b>602</b>	\$303.00	\$203.00 for each additional sibling.

Make checks payable to "BSRC".

**How to Sign Up:**

Fill out the registration form on page two. Deliver the form and payment to the front desk of the Fitness/Aquatic Center or mail it to BSRC at P.O. Box 1537 Mechanicsville, VA 23116.

For questions, contact Aquatics Director Will Brunner at 730-2472 or [bsrcaquatics@gmail.com](mailto:bsrcaquatics@gmail.com).



**BURKWOOD SWIM AND RACQUET CLUB  
FALL HIGH SCHOOL SWIM PREP GROUP  
REGISTRATION FORM**

DATE: \_\_\_\_\_

Parent Name: \_\_\_\_\_

BSRC # (if applicable) \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

First Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_

Second Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_

Third Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_

**COST**

Members:      **601**      \$153.00      \$143.00 for each additional sibling.

Nonmembers: **602**      \$303.00      \$203.00 for each additional sibling.

**MEDICAL WAIVER**

I HEREBY RELEASE, BURKWOOD SWIM AND RACQUET CLUB, AND ALL STAFF FROM ALL RESPONSIBILITY, ACCIDENT, OR INJURY INCURRED WHILE PARTICIPATING IN THE HIGH SCHOOL PREP PROGRAM.

FURTHERMORE, I AUTHORIZE BSRC PERSONNEL TO SUMMON APPROPRIATE MEDICAL ATTENTION FOR MY CHILD IN THE EVENT OF MY ABSENCE.

I HAVE READ AND UNDERSTOOD THE FOREGOING RELEASE AND I AGREE TO THE ABOVE TERMS.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_