



SUMMER SWIM TEAM

June 12 – August 10

- Full Summer \$600
- 4 Weeks \$300
- *Pre Select Any Additional \$80/week*

Checks Payable to Pacific Swim Team
 14343 Silverset Street | Poway | 92064

LOCATIONS | SCHEDULE:

RANCHO ARBOLITOS Mon - Thurs
 14343 Silverset Street | Poway | 92064

MORNING

- Beginner Novice:** Mon - Thurs | 10:00-10:30am
 Mon - Thurs | 10:30-11:00am
- Advanced Novice:** Mon - Thurs | 9:00-10:00am

RANCHO ARBOLITOS Tue - Thur
 14343 Silverset Street | Poway | 92064

AFTERNOON

- Beginner Novice:** Tues/Thurs | 5:00-5:30pm
 Wed | 4:30-5:00pm
- Advanced Novice:** Tues/Thurs | 5:00-6:00pm
 Wed | 4:30-5:30pm

DEL NORTE HIGH SCHOOL* Mon - Thurs
 16601 Nighthawk Lane | San Diego | 92127

- Advanced Novice:** Mon - Thurs | 4:30-5:30pm

**Ages 12 & Over Only /Must Know All Strokes*

EVENTS:

No Swim 7/3 & 7/4

Dive Practice: 6/21, 7/5, 7/19, 8/2 @ Poway Community

Meets: 7/15 @ Del Norte High School
 8/5 @ Poway Community
 (13094 Civic Center Dr)

Circle One

Participant Last Name: _____ First: _____ Age _____ Beginner / Advanced

Participant Last Name: _____ First: _____ Age _____ Beginner / Advanced

Participant Last Name: _____ First: _____ Age _____ Beginner / Advanced

Parent Name: _____ Cell. Number: _____ Email: _____

Medical Conditions: _____ EpiPen: Yes / No

I, the understand hereby give consent for my child(ren) to participate in all events conducted by Pacific Swim Team. I agree not to hold any employee/representative or owner of Pacific Swim Team, Inc or Rancho Arbolitos LLC liable for any type of personal injury, loss of life or damage to property sustained by me or my child(ren) as a result of participation.; In consideration of having the opportunity to participate as either a team member or competitor at any location, and in acknowledging that I am aware of and willing to assume the risks associated with this activity, I hereby voluntarily agree to waive, hold harmless and indemnify Pacific Swim Team Inc., Rancho Arbolitos Swim Tennis LLC and its trustees, agents, volunteers and employees from any and all claims, demands, damages and causes of action of any nature whatsoever, which I, my heirs, my assigns or successors may have against them for, on account of, or by reason of my participation in the above activities. If the contact cannot be reached in an emergency, I authorize any coach or representative of the Club to obtain emergency care. If a parent cannot be contacted in the event of an emergency, I authorize any coach or representative to obtain emergency care as needed.

Parent/Guardian Printed Name: _____

Parent/Guardian Signature _____ Dated: _____