



# Goal Sheet 2014

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

Years of Swimming Experience: \_\_\_\_\_ Lessons/Team/Fun

## **Favorite Thing/s About Swimming**

(Friends, Meets, Exercise, Games, etc):

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## **Favorite Events and/or Strokes**

(Butterfly, Back, Breaststroke, Free, Distance, Sprint, etc):

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**Three Goals for the Season** (Learn how to dive, drop time, swim 2 laps without stopping, etc):

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