

# 2019 HIGH SCHOOL HOLIDAY SWIM CAMP

EAST COAST AQUATIC CENTER

5905 Portsmouth Blvd

Portsmouth, VA 23701

## OVERVIEW

East Coast Aquatic Team is pleased to announce this year's **High School Holiday Swim Camp**. This camp is 6 days with 2 hours each day. This program is a great opportunity to have your swimmers work with experienced Coaches developing technique, timing, and philosophy of all 4 strokes, starts, turns and finishes. The training, drills, and kick sets will be geared

to gaining speed while maintaining proper stroke technique. Video analysis of the swimmers strokes will be used in the learning process, as well as classroom sessions to understand the timing and philosophy of each stroke. This clinic is for High School aged swimmers. This is a FANTASTIC way to train over the holiday break for their high school swim seasons.

## CAMP SESSIONS

(CHECK ONE OR BOTH)

\_\_\_ Camp 1 - \$120

Mon – Dec 23: 9-11 am

Tues – Dec 24: 9-11 am

Thurs – Dec 26: 9-11 am

Fri – Dec 27: 9-11 am

Mon – Dec 30: 9-11 am

Tues – Dec 31: 9-11 am



Questions Contact Art Anthony – [CoachArt.ECAT@gmail.com](mailto:CoachArt.ECAT@gmail.com) – 757-450-2152 Cell

# 2019 HIGH SCHOOL HOLIDAY SWIM CAMP

## REGISTRATION FORM

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Last Name	First Name (Swimmer)	Age
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Contact Cell Phone	Email address
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High School Team

**Camp Sessions: \$120.**

\_\_\_ Camp 1 (December 23, 24, 26, 27, 30, 31): 9-11 am

Please contact Coach Art at the number below if you have any questions. **Please mail this form and check payable to ECAT to reserve your slot. Mailing address: ECAT, 857 Shoal Creek Trl, Chesapeake, VA 23320. Thank you!**

I agree to pay the applicable program fee for the program selected. I acknowledge that fees are NOT refundable. I agree to abide by all facility and program rules and regulations.

I represent that I have NO life-threatening conditions. I know that swimming & water activities, like all forms of exercise, involve a degree of risk. By participating in the program, I accept all risks associated with the use of the facility and participation in the program. If the participant is a minor, I accept the risk on his or her behalf as his or her parents or guardian.

I hereby release East Coast Aquatic Center and East Coast Aquatic Team, its employees, officers, directors, members, and independent contractors from any and all damages for personal injury arising in any way from use of the facility or participation in the program, and I agree to look solely to my insurance to pay damages I suffer. If the participant is a minor, I execute this release on behalf of said minor as his or her parent or guardian.

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Parent/Guardian name	Today's Date	Signature
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