

2010 COMPETITIVE SWIMMING QUESTIONNAIRE

Please complete only if you intend to join Chikopi's Competitive Swim Program

Name: _____ Date Of Birth: _____ **DD/MM/YY**

Home Club Name: _____ Age: 01 July 2010 _____

Coach: _____ Preferred Stroke: _____

Registration #: _____

Skill Level	Excellent	Good	Fair	Poor
Freestyle				
Back Stroke				
Breast Stroke				
Butterfly				

BEST TIME	50y	50m	100y	100m	200y	200m	400y	400m	500y	800m	Mile
Free											
Back											
Breast											
Fly											
I.M.											

We prefer to stress stroke, turns, starts, hard distance and dry land work, but will taper for summer-end meets if so instructed. Would you like us to taper for a summer-end meet? **Yes/No**

Do you have a big meet soon after camp? **Yes/No** If yes, where? _____

Please detail below any specific swimming problems you want worked on at Chikopi.

We try to participate in a competitive swim during the summer, this is an added expense for campers to go to, it costs approximately \$50, if you would like your son to participate in the Swim please make an additional payment to your child's store account to cover the added costs.

Signature _____

Date _____

Parent's Signature Required For Camper To Go To Off Camp To Race:

The cost of attending the Swimming competition is the responsibility of the camper, all expenses incurred during the trip will be deducted from the campers store account. Campers will only be permitted to go if they have enough in their store account to cover the cost of the trip.