

CAMP CHIKOPI COMPETITIVE SWIMMING QUESTIONNAIRE

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

Name: Home Club Name: Coach:												DD/MM/YY	
								ferred S					
		Level		Excellent	t	Good		Fair		Poor			
_	Freestyle Back Stroke Breast Stroke												
_	Butter												
BEST Free Bacl		50y	50m	100y	100m	200y	200m	400y	400m	500y	800m	Mile	
Brea Fly I.M.	ast												
Mori Afte	ning cl	ass: 35 Swim ⁻	5 – 45 m Геат Р	rd Open V ninutes ractice: 70 specific sv) – 90 mir	nutes.			sh to shai	re with the	e coach.		
Sig	nature		Parent	's Signatu	ıre Requir	ed for Ca	mper to P	articipate	in an off	camp eve	nt:	Date	

The cost of attending any off campus Swimming event is the financial responsibility of the parents, all expenses incurred during the trip will be invoiced to the campers store account.