



Livermore Aquacowboys

FALL REC **SWIM TEAM**



WANT TO KEEP SWIMMING AFTER SUMMER LEAGUE?

From the beginning swimmer to the elite competitor, the LAC coaching staff takes pride in developing the necessary skills that allow each swimmer to reach his or her full potential. Whether you just want to stay in shape, improve your technique and endurance, or begin competing at the United States Swimming level, there is room for all!

The 2011 Fall Rec program will offer classes **2-5 days per week.**

Dates: September 6-December 16

Swimmers will be placed in groups according to ability.

All practices are held at the Livermore Valley Tennis Club. You **DO NOT** need to be a member of LVTC to join the Livermore Aquacowboys.

Required Equipment:

Swimsuit, cap, goggle & fins
(all items are available for sale in the LVTC Pro-Shop)

Space is limited!-Must be registered by September rd to swim the first day!

Fees & Practice Times

(either **W/F** or **T/TH** or specified below):

Pre-Comp: 4:30-5:00pm

LVTC Member: \$295

Nonmember: \$325

Novice Black or Gold: 3:45-4:30pm

LVTC Member: \$395

Nonmember: \$435

Junior 1:

M, T, Th, F 3:45-5:00pm; **W** 5:00-6:15pm

LVTC Member: \$550

Nonmember: \$640

Junior 2: Monday-Friday 4:45-6:15pm

LVTC Member: \$575

Nonmember: \$665

Pre-Senior: Monday-Friday 4:45-6:30pm

LVTC Member: \$675

Nonmember: \$770

Fall Conditioning: Ages 12+ Tu, W, TH 7:00-8:00pm

LVTC Member: \$395

Nonmember: \$435

Additional Information:

Not sure what group to choose?

Contact the club so we can assess your swimmer. Swimmers are placed in groups based on ability.

USA Swim Meets:

Fall meets will be strongly encouraged but are optional. To compete in a meet each swimmer must be registered with Pacific Swimming (\$60 yearly fee). Ask your coaches for more details.

Contact:

LVTC Aquatics Department
(925) 443-7700
swimming@lvtc.com
Lacswimming.org

LIVERMORE VALLEY TENNIS CLUB

2010-2011 LIVERMORE AQUA COWBOYS CONSENT & LIABILITY WAIVER

We, as parent(s) or guardian(s) of our minor child _____ (“Child”), do hereby consent to our Child’s participation as a member and/or swimmer on the Livermore Aqua Cowboys swim team (“Team”) using the Livermore Valley Tennis Club (“Club”) facilities including but not limited to Club property, its clubhouse, pool(s), deck and parking area other swimming facilities where participation is held (“Facilities”). We are aware that various risks, including death and serious injury, can be associated with participation on competitive swim clubs like the Team and the use of the Facilities. We hereby accept and assume on behalf of our Child full responsibility for any and all known and unknown risks that might exist from our Child’s participation on the Team and use of the Facilities. We represent that we have verified with a physician that our Child is physically and medically suitable to participate on the Team.

Release of Liability

We hereby release the Club, it’s officers, employees, agents and members from any and all injuries, negligence, damages, causes of action, claims, losses and costs of any kind whatsoever arising out of or resulting from any injury, death, or damage to property which we or our Child may sustain as a result of or arising out of our Child’s participation on the Team or use of the Facilities.

Hold Harmless / Defense

We further agree to indemnify, defend, and forever hold harmless the Club, its officers, employees, agents and members from any and all injuries, negligence, damages, causes of action, claims, losses and costs of any kind whatsoever that may arise out of or relate to our Child’s participation on the Team or use of the Facilities.

Consent for Medical Treatment

In the event of a medical emergency, we authorize and give our consent and permission to the Club and its employees to request and provide any and all medical assistance deemed appropriate in their discretion, including but not limited to rendering first aid, arranging treatment by medical personnel, physicians, nurses, or paramedics, admitting our Child to a hospital or other medical facility, and authorizing any emergency medical treatment.

BOTH PARENTS/LEGAL GUARDIANS MUST SIGN THIS FORM

Parent/Guardian signature

Parent/Guardian signature

Parent/Guardian name (print)

Parent/Guardian name (print)

Relationship to Child

Relationship to Child

Date

Date

Registration Information:

Swimmers Name _____ AGE _____

Address _____ Phone # _____

Parent’s Name _____ Member # _____ Group _____

Email _____ Emergency Contact & Phone # _____