

The **Cougar Swimming & Diving Camp** is sponsored by **Shawn Thomsen**, *Kennedy Men's Swimming Coach* and **John Ross** *Kennedy Women's Swimming & Diving Coach* and is designed for individuals in grades 6 through 12, who are interested in competitive swimming & diving.

Session 1: Monday, June 6, through Thursday, June 23, 2011
Diving (4:30 – 6:00 p.m.)
Swimming (5:30 – 7:00 p.m.)

Session 2: Monday, June 27 through Thursday, July 14, 2011
Diving (4:30 – 6:00 p.m.)
Swimming (5:30 – 7:00 p.m.)

Session 3: Monday, July 18, through Thursday, August 4, 2011
Diving (4:30 – 6:00 p.m.)
Swimming (5:30 – 7:00 p.m.)

Session 1 and Session 2 will concentrate on teaching individual techniques and fundamentals for competitive swimming & diving, along with starts and turns.

Session 3 will focus on conditioning for competitive swimming & diving. Activities will include water, dry-land conditioning and stroke drills. (*All participants should bring athletic shoes every day*).

Equipment:

Each athlete should bring suit, goggles, cap, towel etc. Plan on bringing a bag to house your change of clothes. Locker rooms will be used for changing only.

Location:

On the first day of each session please report to the pool area 15 minutes prior to the start of camp for registration. Camp will be held in the pool area.

Fee/Registration:

The fee for the Cougar Swimming & Diving Camp is

Session 1: \$60.00
Session 2: \$60.00
Session 3: \$60.00

or

\$150 for all three sessions

KAST

If a swimmer is registered for both sessions 1 and 2 they may join KAST (Kennedy Area Swim Team) for no additional fees.

Detach the registration and mail beforehand, or bring along with fee on the first day of camp.

Shawn Thomsen/John Ross
Kennedy High School
4545 Wenig Road NE
Cedar Rapids, IA 52402

Please make check payable to Kennedy Swimming and Diving

If you have additional questions regarding the Cougar Swimming Technique Camp please contact:

John D Ross: Telephone: 350-0266
E-mail: jrdrarnr@aol.com

Shawn Thomsen: Telephone: 551-2203
E-mail: Sthomsen@cr.k12.ia.us

2011 COUGAR SWIMMING & DIVING CAMP

Name: _____ Grade in the fall: _____

Address: _____ Zip code: _____

Parent's Name: _____ Home phone # _____ Work # _____

Session 1 **Session 2** **Session 3** **KAST** **yes** **no** **E-mail** _____
(circle session(s) attending)

Parent's Release and Indemnity Agreement

I hereby authorize the Director and any member of the camp staff to act for me according to their best judgment in any emergency requiring medical attention and hereby waive and release Kennedy High School and all members of the camp staff from all claims on account of injuries which might be sustained by my child while attending this camp; and I agree to indemnify Kennedy High School and all members of the camp staff for any claim which may hereafter be presented by my child as a result of such injuries

Date: _____ **Parent/Guardian Signature** _____