

This Camp is designed to aid in the development of High School swimmers at all levels.



July 17 – 23 (Wed-Fri &

Mon & Tues 5 days)

&

July 24-30 (Wed-Fri &

Mon & Tues 5 days)

6:30 – 8:30 am

Mesquite Pool

\$100 for one week (5 days)

\$175 for both weeks

REGISTER BY MAY 10 AND

SAVE

FOR MORE INFORMATION:

[Brendan Keyes@gilbertschools.net](mailto:Brendan_Keyes@gilbertschools.net)

or

Call: (480) 510-2645

<https://sites.google.com/site/gilbertswimdiv/home>

The Main Focus of the Camp:

- Fundamental and advanced stroke development for all competitive strokes
- Improving body positioning for all strokes
- Improving the turns of all four competitive strokes
- Improving the cardiovascular endurance needed to be competitive

Fees:

**\$ 100 week for one
\$ 175 for all days**

REGISTER BY MAY 10, 2019

AND SAVE:

\$10 OFF ONE WEEK

\$25 OFF TWO WEEKS

\$25.00 non-refundable deposit due by June 30, 2019. There will be a \$40.00 late fee applied to all participants who register after July 1, 2019. Cancellations must be made prior to July 10 in order to be eligible of a full refund.

Please send electronic payments via Paypal to:

https://www.paypal.com/cgi-bin/webscr?cmd=_s-xclick&hosted_button_id=2DPL55H45N4GS

or mail payment to:

**Tiger Swim Camp,
2118 S. Canfield, Mesa, AZ
85209**

Registration Form

(Please complete one per child)

Participant's Name:

Week(s) in attendance:

Parent's Name:

Address:

Phone: _____

Email: _____

See back panel:

Release must be completely filled out for registration.



Release Form:

As a condition precedent to participation in the Gilbert Spring Swim Camp, I, as the parent and/or legal guardian of:

_____ agree to maintain health insurance for my son/daughter while he/she participates in this camp. If I do not maintain health insurance for my son/daughter, I agree to purchase the student accident insurance policy offered by the camp through the school district.

Provider: _____

Policy Number: _____

In case of emergency, I authorize the camp staff to obtain medical/dental care for the participant named herein.

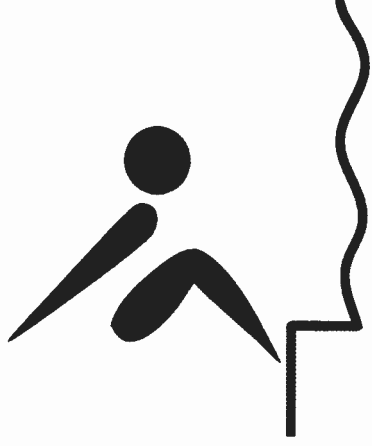
Name of participant: _____

Parent/Guardian Signature: _____

Date: _____

Tiger Swimming Camp
2118 S. Canfield.
Mesa, AZ 85209

Tiger Swim Camp



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Mon & Tues 5 days)

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& Tues 5 days)

Mesquite Jr. High Pool

Camp Directors & Staff:

Brendan Keyes (Gilbert HS)
Karen Hadlin (Mesquite HS)