



# Lincoln Rails/YMCA Fall Swim Team

A Comprehensive Swim Team for All Swimmers on the Southside, Norwalk and Carlisle

**Ages** 5-18 years (This is a competitive swim program – participants must be able to swim one length of the pool)

When START Date: Monday, October 22, 2012

END Date: Saturday, February 23, 2013

Practice Options: **CHOOSE ONLY ONE** (Denote choice on registration form)

#### **Beginner and Intermediate Elementary Swimmers:**

1) 6:00-7:00 p.m. – Monday, Wednesday, Friday

2) 6:00-7:00 p.m. - Tuesday, Thursday & Saturday 10:45-11:45 a.m.

### Beginner and Intermediate Middle School Swimmers:

3) 6:00-7:00 p.m. - Tuesday, Thursday & Saturday 12:45-1:45 p.m.

Note: Tuesday/Thursday practices are at the South YMCA. Saturdays are at Lincoln.

## Advanced Elementary and Middle School Swimmers:

- 4) 7:00-8:00 pm Monday, Wednesday, Friday
- 5) 7:00-8:00 p.m. Tuesday, Thursday & Saturday 11:45-12:45 p.m.

\*Each practice option has a limited number of available spots so that all practices have an appropriate amount of swimmers.

**Advanced Practices:** Prior approval is required to practice at the Advanced level. You must contact Coach Weber before registration to obtain prior approval. New swimmers will start in their agegroup and may move to an advanced practice, if deemed necessary.

**Swim Meets:** Occur on Monday evenings. The schedule will be sent out once set.

**Where** Lincoln High School (unless otherwise noted)

**Fee** \$130 (YMCA Members & Non-members) \*Includes all meet fees, dues, and <u>ONE</u> LHS swim cap

Registration Deadline: Monday, October 8th, 2012

**Contact** Brayton Weber – Brayton.Weber@dmschools.org

**Open House:** Informal meeting on October  $10^{th}$  at 6:00 p.m. in the Lincoln Commons. Here you can pay for/pick up optional team suits and goggles, get information, talk with coaches, and get individual swimmer pictures.

Please complete the Registration Form and submit with payment to the South Suburban YMCA. Visit <a href="https://www.railswimming.com">www.railswimming.com</a> for more information.

#### **SOUTH SUBURBAN YMCA**

401 E. Army Post Road Des, Moines 50135 **P** 515 285 0444 www.dmymca.org





# **Lincoln/YMCA Swim Team Registration Form**

Swimmer's Name	Birthdate	Practice # Chosen	Size of T-shirt (S-XXL) (include youth(Y) or adult(A)	
Nothers name:	Fa	thers Name		
Mothers Work Phone:			2:	
Mothers Cell Phone:				
Mothers Occupation:				
Mothers Email:				
Address:				
City: State		o:	_	
Home Phone:		·	<del>_</del>	
Alt Phone:				
Medical Conditions:				
In my absence and in the event of	physical injury to m	y child(ren), I here	eby allow my child(ren)	
to be treated by a physician or oth	er medical personn	el. To properly tre	eat a physical injury, this	
may mean using ambulance and he sustained.	ospital services in th	ne local area where	e the injury was	
X	Da	ate:		

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