

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

PRACTICE LIKE A CHAMPION

Storm Swim Team

The SCHERTZ FAMILY YMCA Storm Swim Team is open to swimmers ages 6 – 18. We are a year-round competitive USA Swimming club offering high quality professional coaching and technique instruction for youth with various swimming skills. We have four skill levels from beginner, intermediate, advanced, to elite competitor. Swimmers regularly have opportunities to show off their swimming skills at swim meets.

Fall & Spring Practice Schedule

Schedule subject to change

*There will be no Saturday practice on swim meet weekends. Practice is up to coach's discretion.

Level	Monday	Tuesday	Wednesday	Thursday	Saturday
Tidal Wave	5 - 6p	5 - 6p		5 - 6p	9 - 10a*
Seniors II	6 - 7:30p	6 - 7:30p		6 - 7:30p	7 - 9a*
Seniors I	6 - 8p	6 - 8p	7 - 8:50p	6 - 8p	7 - 9a*

Monthly Dues

Level	Y-Member/Schertz Resident	Non-Member
Tidal Wave	\$100	\$110
Seniors II	\$115	\$125
Seniors I	\$130	\$140

• All members are required to be USA Swimming registered. USA Swimming annual registration is \$86,

not included in monthly dues. There is also a \$55 annual team registration fee. Birth certificate or passport is required for registration.

- Swim Team Cap is provided.
- Swimmers must bring goggles and fins; Seniors will also need to bring a snorkel.
- We support the recommendations by the CDC and strongly recommend that everyone 2 yrs and older wear a mask indoors.

To tryout or for more information, please email Swim Team Coach Brandon Fain: brandonf@ymcasatx.org

SCHERTZ FAMILY YMCA • 621 Westchester • 210-619-1900





SWIM TEAM REGISTRATION

First Name	Middle Name	Last Name	Gender
Date of Birth	Primary Phone	Secondary Phone	Email address
Street Address	City	State	Zip
Have you registered with	the Schertz Swim team bef	ore? 🗌 Yes 🗌 No 🛛 If so, v	when?
If no, how did you hear ab	out us?		
	another swim club prior to	joining the Storm? 🗌 Yes 🗌] No
Parent/Guardian 1 Name	Phone	Email add	dress
Parent/Guardian 2 Name	Phone	Email ado	dress
Emergency Contact	Phone	relations	hip
Please place a check next	to the information you wo Parent's Name	uld like to include in our tear	n directory:
more information on form Signed try-out form or USA Swimming Registr EFT Authorization For	s, please view the Registra written authorization from ation Form with a copy of	tion information in the Swim n swim team coach. Level: Birth Certicate or South Texa	
Waiver: I will be responsible f	or my child's medical costs due	to accident or illness. I will hold	the YMCA of Greater San Antonio and

it's directors, officers, employees, volunteers and other agents harmless for incidents which may arise from participation in YMCA programs and activities, realizing that there are risks in these activities. I give permission for photographs to be made of my child(ren) to be used solely for publicity and training purposes by the YMCA of Greater San Antonio. I understand all refund/credit requests are to be done in writing and there will be no refund/credit requests after the first session. **The is a \$20 service fee on all refunds.**

Parent/Guardian Signature

Date

Level	Y Member	Non-Member	Total
Tidal Wave	\$100	\$110	\$
Seniors II	\$115	\$125	\$
Seniors I	\$130	\$140	\$

Staff Receiving Payment:	Date of Payment:	Money Collected: