

Things you want to know!

Instructors are professionals and will be giving high quality instruction in a conversational format. Swimmers are encouraged to ask questions in order to learn as much as they can.

Brief lectures and stories will be a part of the educational format to stimulate a more relaxed atmosphere and promote curiosity about the sport.

One class per series will be specifically set aside for Starts and Turns.

This program is designed around the sport of competitive swimming therefore, it is important that the swimmer be properly attired. Please make sure that your swimmer has a pair of goggles, a swim cap for those that have long hair, and a competitive swim suit.

Serving the swimming needs of
the Tri-County area
through quality swim programs!



Maryland Suburban Stroke and Turn Clinic

MSS&TC

2011-12 Season

**A Friday or Sunday night clinic
at 6:00-7:00 PM**

MSS&TC is a program offering of the Maryland Suburban Swim Club at the Fairland Aquatics Center and is designed to offer competitive stroke and turn work for athletes interested in improving overall swimming technique. Swimmers will be exposed to stroke techniques that are useful in mastering the sport of competitive swimming and the program will be presented in a format that is both enjoyable and interesting to the athlete.

Have Questions?
Call...240-286-2319
or email to:
office@msscswimming.com

Please keep in mind....

Space is limited. We will be taking swimmers on a first come first serve basis. Unless you are called and told that your swimmer(s) is not in the program you can safely assume that they are in! Registration will be capped at 40 swimmers per clinic series. Please mail your registration no later than September 1, 2011 to ensure your likelihood of participating.



If your curious about other MSSC
programs visit....

www.msscswimming.com

Get into our Sport!

Another Quality
MSSC Program Offering

MSS&TC Offerings

FRIDAY CLINICS

1st Clinic Series A1
 Sept. 16 - Nov. 11
 no clinic Oct. 14

2nd Special Clinic Series B
 on Fridays and Sundays
 Nov. 18 - Dec. 18
 no clinic Nov. 20 and 25

3rd Clinic Series C1
 Jan. 6 - Mar. 30
 no clinic Jan. 20, Feb. 3, 24, Mar. 9 and 16

4th Clinic Series D1
 Apr. 13 - June 8
 May 25

SUNDAY CLINICS

1st Clinic Series A2
 Sept. 18 - Nov. 13
 no clinic Oct. 16

2nd Special Clinic Series B
 SAME AS ABOVE

3rd Clinic Series C2
 Jan. 8 - Apr. 1
 no clinic Jan. 22, Feb. 5, 26, Mar. 11 and 18

4th Clinic Series D2
 Apr. 15 - June 10
 no clinic May 27
 Cost per swimmer
 cost for one clinic series \$160.
 cost for two clinic series \$290.
 cost for three clinic series \$400.
 cost for all four clinic series \$490.



Identify all clinic series that your swimmer(s) will be attending. Make check payable to: MSS&TC and mail to: MSSC, P.O. Box 160, Laurel, Maryland 20725.

Swimmer's Last Name _____ First Name _____ Date of Birth / Age _____ Series _____

Swimmer's Last Name _____ First Name _____ Date of Birth / Age _____ Series _____

Swimmer's Last Name _____ First Name _____ Date of Birth / Age _____ Series _____

Swimmer's Last Name _____ First Name _____ Date of Birth / Age _____ Series _____

Parents' or Guardians' Names _____ Cell Phone _____

Street Address _____ City _____ State _____ Zip Code _____

Email Address _____ Summer Pool _____

Emergency Contact Person _____ Phone # _____

for office use only

Fee Enclosed (fees are non-refundable) \$ _____

Are there any physical problems that the coaches should know about such as allergies, hearing, asthma?

It is strongly suggested that swimmers have routine physical examination before participating in our program.

I, the undersigned do hereby indemnify and hold harmless MSSC and all its agents, the Fairland Aquatics Center and its employees from any and all liability, damage, expense, cause of action, suits, claims, or judgments arising from injury to person or personal property or otherwise which arise out of the act of failure to act or negligence of the participants in connection with or arising out of the use of the facilities for this program.

Signature _____ Date _____

8-7-11/2