

**CANYON COUGARS SUMMER 2019  
SWIMMING PROGRAM  
GRADES 8<sup>th</sup>-12<sup>th</sup> (2019-20)**



**Dates:** June 3<sup>rd</sup> – June 13<sup>th</sup> Monday-Thursday

**Daily Times:** 7:30AM-9:00AM Monday-Thursday

**Where:** Canyon High School Swimming Pool

**Who:** Athletes interested in becoming a better swimmer and those interested in learning about competitive swimming.

*\*\*Athletes must be comfortable with swimming at least 25 yards.\*\**

**What:** Learning basic stroke techniques, starts and turns conducted by the Canyon High School Swimming Coach.

**Cost:** \$75 per person      **Make checks payable to Canyon Athletics**

**Contact:** Will Haltom (830-221-2499)      [will.haltom@comalisd.org](mailto:will.haltom@comalisd.org) or [canyon.swim@gmail.com](mailto:canyon.swim@gmail.com)

**Please detach and return with registration fees to Will Haltom by Thursday, May 31st.**

***Mail to or Drop off at CHS:***

Attn: Will Haltom

1510 IH 35 North

New Braunfels, TX 78130

***Fax to:***

830-221-2401

Attn: Will Haltom

***Scan and Email to:***

[canyon.swim@gmail.com](mailto:canyon.swim@gmail.com)

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Athlete's Name \_\_\_\_\_ Athlete's Grade Level 19-20 School Year \_\_\_\_\_

Have you been on a swim team? Yes/No If yes, where? \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Parent Home Phone \_\_\_\_\_ Parent Cell Phone \_\_\_\_\_

Parent E-mail- \_\_\_\_\_

Waiver or Claims: In and for consideration of my participation in this program, we hereby agree and promise that we will not hold the Comal Independent School District, its employees, or any instructors responsible for any loss, damages, or personal injuries that we may receive as a result of participation. This waiver liability expressly includes transportation to and from, or in connections with, said program.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_