

Streamline Sports  
Swim Clinic  
At  
St. Bede's Senior School  
Breaststroke  
December 20<sup>th</sup> 2010

For Competitive swimmers aged 8 - 16 years

**Clinic Programme**

Each Clinic includes two pool sessions at St.Bede's Senior School. Each day will focus on the stroke mechanics and drills for that stroke. Learning is reinforced through lecture and video sessions.

Swimmers please bring a packed lunch and drink for the day

**Timetable:**

0830 - 0900	Registration
0900 - 1030	Pool Session
1030 - 1130	Video /Lecture
1130 - 1300	Pool Session

**Course Fee Swimmers:** £42.50                      Parent /Coach for day £10.00

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I wish to apply for the Breaststroke December 20<sup>th</sup> 2010 [   ]

Name:.....    Date of Birth.....

Address.....

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Post Code.....      Swimming Club.....

Telephone.....      Email.....

Swimmer £42.50 [   ]    Parent / Coach £10 [   ]

Cheques made payable to Streamline Sports  
Book online [WWW.streamlinesports.co.uk](http://WWW.streamlinesports.co.uk)

Please complete and return consent forms with a S.A.E for reply

Please return to: Streamline Sports, Amaryllis, Coldharbour Road, Upper Dicker, East Sussex BN27 3QB

Streamline Sports  
Swim Clinics  
[WWW.Streamlinesports.co.uk](http://WWW.Streamlinesports.co.uk)

Breaststroke: 20<sup>th</sup> December [ ]

To be completed by the swimmers parent or guardian

Swimmers Name.....Date of Birth.....

Please delete Yes / No as appropriate and complete further details as necessary.

Does your child suffer from any medical condition Yes / No

Does your child take any medication Yes / No

Any other relevant information

In compliance with the Data Protection Act 1998, all efforts will be made to ensure that this information is secure and used only in connection with the activities of Streamline Sports Swim Clinics.

- I am aware of and understand the potential risks associated with physical exercise and my child is voluntarily partaking in these activities with knowledge thereof.
- Streamline Sports Swim Clinics accepts no liability for loss or damage of whatsoever nature and howsoever arising caused to my child or suffered by my child whilst on the clinic unless such loss or liability is caused by the negligent act of Streamline Sports Swim Clinics.
- I have read and agree for myself and my child to be bound by these conditions.

Signed - Parent.....Date.....