

DOMINION HILLS

Winter Swim Program

WHO?

Must be a DHARA Member, age 5 and older. All participants must be comfortable with the water and knowledgeable of basic freestyle mechanics.

WHAT?

A weekly program designed to keep the kids in the water during the winter months, emphasizing development and maintenance of skills required for competitive swimming including strokes, starts, and turns.

WHY?

Beginners: To develop the basic strokes necessary for participation on the Swim Team.

Rookies: To stay in shape during the winter season.

Veterans: To supplement training and workout with your teammates.

WHERE & WHEN?

Washington Lee High School Pool

(address)

Sundays from 7:30 – 8:30pm -- **NOTE NEW TIME!!!!***

January 8, 2012 - May 20, 2012

* NEW TIME: We could not get the 6-7:00pm time slot because a county program will now be using the pool during that time, and county activities always get priority over rentals.

COST?

\$110 per swimmer, payable to Dominion Hills Area Recreation Association (D.H.A.R.A.). Program fee is due with Registration.

HOW?

Mail the Registration Form (attached) and \$110 program fee to:

Diann Vaughan, Winter Swim Coordinator
1020 N. Arlington Mill Drive
Arlington, VA 22205

Registration Deadline is November 18, 2011

Questions?

Contact Diann Vaughan at 703-731-8724 or diannvaughan@comcast.net

**Dominion Hills Area Recreation Association
2011-2012 Winter Swim Calendar**

7:30-8:30 pm Sunday Evenings
Washington & Lee High School Pool
1300 N. Quincy Street
Arlington, VA

Practice Date	Status
1/08/12	First Winter Swim
1/15/12	No Swim – MLK Holiday
1/22/12	
1/29/12	
2/5/12	No Swim – Superbowl
2/12/12	
2/19/12	No Swim – President’s Day
2/26/12	
3/4/12	
3/11/12	
3/18/12	
3/25/12	
4/01/12	No Swim – Spring Break
4/08/12	No Swim - Easter
4/15/12	
4/22/12	
4/29/12	
5/6/12	
5/13/12	
5/20/12	Last Swim

DOMINION HILLS
Winter Swim Registration 2011-2012
(Please complete one form for each swimmer registering)

Name _____

Age _____ Birth Date _____ Phone _____

Address _____

E-mail(s) _____

Note: Winter Swim correspondence is done mostly via e-mail. Please provide e-mail(s) that are checked regularly.

Parent(s) Names _____

Swim Experience:

Did your child participate on the DH Swim Team? Yes No

This past summer my child swam: A Meets B Meets

My child can swim a full lap: freestyle breaststroke backstroke butterfly

Please describe swimmer's experience (i.e. -- has accomplished freestyle mechanics, can swim one lap freestyle without stopping, etc.) This information helps us properly prepare for the number of coaches we need to have for the various levels.

Waiver: My child, _____, has my permission to participate in the Dominion Hills Winter Swim Program. My child is physically able to participate in this aquatic program. I release the Dominion Hills Area Recreation Association, its Board, agents, employees and administrators of this program from responsibility for any accident, injury, or illness caused by his/her participation in the Winter Swim Program.

PARENT SIGNATURE _____ **DATE** _____

Space is limited! Registration is limited to the first 60 registrations. Please note, for the safety of our swimmers and to comply with Red Cross recommendations, cut-offs will also be in place for various age groups/ability levels.

Please mail this Registration Form and \$110 program fee to:

Diann Vaughan, Winter Swim Coordinator
1020 N. Arlington Mill Drive
Arlington, VA 22205

Checks payable to D.H.A.R.A
(Reference Winter Swim in memo line)