

## Important COHS Swim Information:

### Pool Location:

9360 Elk Grove Florin Rd. Elk Grove, CA 95624

### Parking at the Pool:

Please pull to the back of the parking lot. There is plenty of parking in the back of the lot, we do not want to disturb the businesses in front of the pool. All swimmer pick up must be done behind the pool as well. **OUR LEASE WITH THE POOL DEPENDS ON IT!**

### Participation:

COHS Swim believes all students interested in swimming on the team should be given the chance. We don't make cuts, however if a swimmer has behavioral problems, or does not get the "2.0" needed to swim in meets, swimmers may be required to sit out.

### Finances:

We understand parents have a lot of demands on their funds these days. Please let the coaching staff know if the team suit, activities or fundraising is a hardship on your family. We don't want this to be the reason any student doesn't swim or participate.

### Coach's Information:

Head Coach- Sara Vaughn (916) 897-6548

Assistant Coach- Ashley Weiss (916) 833-1785

[cohswolfpackswim@gmail.com](mailto:cohswolfpackswim@gmail.com)

Season Runs from February 8- May 15

All meets are away- We will need parent drivers

The only required item of spirit wear is a team suit and cap

Top 75 Swimmers will make the travel team

80 % of practices must be attended to stay eligible for travel team

If work, school or other obligations will not allow you to fulfill this requirement please understand before the season starts that you will not be able to participate in swim meets.

### **What Do the Coaches Need Help With?**

Parent Volunteer to get swim meet results in school bulletin and to the Sac Bee

Parent Volunteer(s) to organize team banquet

Parent Volunteer(s) to organize senior night

Timers at the swim meets

Booster Parent- Represent Wolfpack swim in our COHS Athletic Booster Organization

In participating in the 2016 Consumes Oaks High School Swim Team I understand that is comes with the following commitment:

1. I commit to making 80% of all practices. \_\_\_\_\_
2. I commit to be present at all swim meets. I understand that not showing up for a swim meet without proper notification to the coaches ahead of time is grounds for removal from the travel team. \_\_\_\_\_
3. I commit to maintaining a 2.0 grade point average at all times. Being a student athlete is a huge time commitment, I commit putting 100% into being a student as well as an athlete. \_\_\_\_\_
4. I commit to respecting my teammates, coaches, opponents and all facility workers at our home and away practices, meets and functions. \_\_\_\_\_
5. I commit to using appropriate language on the pool deck. \_\_\_\_\_
6. I commit to being on time for all of my individual and relay races. \_\_\_\_\_
7. I understand that the consequences below will be followed if I miss an individual or relay race at any swim meet. \_\_\_\_\_

By signing this commitment agreement I understand that if I choose not to honor any of these commitments:

1<sup>st</sup> incident: Loss of relay eligibility

2<sup>nd</sup> incident: Loss of traveling to upcoming meet

3<sup>rd</sup> incident: Removal from team

Swimmer Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

## COHS Swim Team Registration Form

### Swimmer Information:

Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Student ID # \_\_\_\_\_ T-Shirt Size \_\_\_\_\_

Swimmer Cell Phone # \_\_\_\_\_

Swimmer Email Address: \_\_\_\_\_

Have you ever swam before? \_\_\_\_\_

### Parent Information:

Mother's Name: \_\_\_\_\_

Mother's Phone #: \_\_\_\_\_

Mother's Email Address: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Father's Phone #: \_\_\_\_\_

Father's Email Address: \_\_\_\_\_

### Emergency Contact Information:

If your swimmer is injured or sick, I will call both parent's first. If I cannot get ahold of you, who should I contact?

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Winter Swim Clinic January 4-29 \$149**  
**Monday through Thursday 3:45-5:00pm**

These clinics are perfect for you if:

- You want to join your high school swim team
- You're interested in the swim team, but are not sure if you are ready or have the skills
- Want to get a head start on your high school or recreational swim training or just ready to get back into the pool

Time to get back in the pool and get in shape. Work on your technique and endurance before the season starts. All abilities are welcome. Each Day/Week will represent a different skill/stroke.

**Weekly Schedule:**

Week 1: Freestyle/Backstroke Week 2: Breaststroke/Butterfly Week Three: IM Work

Week Four: Review of all strokes, starts, turns and finishes

**Daily Schedule:**

Monday: Mid Distance Training

Tuesday: Stroke Technique

Wednesday: Distance Training

Thursday: Underwater work, turns and wall work

Student Name/ID #: \_\_\_\_\_

	Fee	Total:
Winter Swim Clinic Varsity (4:00-5:00pm)	\$149	
Winter Swim Clinic JV (5:00-6:00pm)	\$149	

Total Due: \$ \_\_\_\_\_

Checks can be made out to SSFC

Credit Card Information:

Card Number: \_\_\_\_\_

CVV #: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

**Sunshine Swim and Fitness Center**  
**ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM**

I hereby assume all of the risks of participating in Sunshine Swim and Fitness Center, LLC., programs. Including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in Sunshine Swim and Fitness Center, LLC., programs. I acknowledge that this Accident Waiver and Release of Liability Form will be used by the organizers of the Sunshine Swim and Fitness Center, LLC., in which I may participate and that it will govern my actions and responsibilities at said Sunshine Swim and Fitness Center.

In consideration of my application and permitting me to participate in Sunshine Swim and Fitness Center, LLC., programs, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE Sunshine Swim and Fitness Center LLC., managers, employees, contractors, volunteers and their property management company and its employees, contractors from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from Sunshine Swim and Fitness Center.

(B) I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in Sunshine Swim and Fitness Center programs, whether caused by negligence or otherwise.

I acknowledge that participating in Sunshine Swim and Fitness Center programs may carry with it the potential for death, serious injury, and personal loss. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, employees, and lack of hydration.

I consent and agree that Sunshine Swim and Fitness Center, LLC., and/or their employees, representatives may take photographs or digital recordings of me as a participant during class and or special events and use these in any and all media for training or promotional purposes. I further consent that my identity may be revealed therein or by description text or commentary. I waive any rights, claims or interest and I understand that there will be no financial or other remuneration.

OPT-OUT. By checking this box I am stating I do not want photographs taken of me as a participant to be used in any media forms for training or promotional purposes.

The accident waiver, release of liability and image release shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. This contract will remain in effect for undersigned participant until a time in which Sunshine Swim and Fitness Center, LLC or participant revokes or individualizes contract. At which time a revision will be drawn up and signed by all parties.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT. I SIGN IT ON MY OWN FREE WILL FOR MYSELF AND THE UNDER AGED PARTICIPANTS LISTED ON THE REGISTRATION FORM THAT I REPRESENT.

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Print Name, Sign and Date

## **2016 Wolf pack Swim Team Practice Schedule**

**Practice is held at 9360 Elk Grove- Florin Road**

### **February**

**Week One 2/8 & 2/9 Whole Team 4:00-5:30pm Team Try Outs**

**After 2/9:**

Pool Time- Monday through Thursday

4:00-5:00pm Group One Varsity (Top 32 Swimmers)

5:00-6:00pm Group Two Varsity/JV Elite

5:30-6:30pm Group Three JV/Newer Swimmers

Friday:

4:00-5:00pm Group One

5:00-6:00pm Group Two and Three

### **March**

Pool Time- Monday through Wednesday

4:00-5:00pm Group One Varsity (Top 32 Swimmers)

5:00-6:00pm Group Two Varsity/JV Elite

5:30-6:30pm Group Three JV/Newer Swimmers

(Spring Break Practice Whole Team from 5:00-6:00pm)

Friday:

4:00-5:00pm Group One

5:00-6:00pm Group Two and Three

### **April (Starts 4/4)**

Monday through Wednesday

6:00-7:00pm Group One

7:00-8:00pm Group Two

Friday:

4:00-5:00pm Group One

5:00-6:00pm Group Two and Three

**May-** Section Swimmers Practice will be announced at a later date.

## COHS Swim Team Activity and Meet Schedule

February:

Monday February 8- First Day of Practice

Tryouts will be held the first week of practice

Monday February 15- No Practice of President's Day Pool is closed

Thursday February 25- Group Two & Three Time Trials 5:00pm

Friday February 26- Group One Time Trials 4pm & Team Tie Dye Day 5:00pm

March:

Tuesday March 1- Swim A Thon- Team Fundraiser

Thursday March 3-Swim Meet @ Oakmont 4pm

Thursday March 10-Swim Meet @ Roseville 4pm

Thursday March 17- Swim Meet @ Del Campo 4pm

**Team Pictures March 18 4:00pm**

March 21-25: Spring Break Practice 4:00-5:00pm

Thursday March 31-Swim Meet @ Antelope 4pm

April:

Practice Schedule Changes April 4

Thursday April 7-Swim Meet @ Bella Vista 4pm

Thursday April 14-Swim Meet @ Whitney 4pm

Thursday April 21-Swim Meet @ Ponderosa 4pm

Thursday April 28- Pre Champs Pasta Feed and Senior Night at 6:00pm

April 29- 30 Conference Championships All Day (Trails on Friday/ Finals and Relays on Saturday)