

April 20, 2011

Dear HMSTC Swim Team Member or Member-To-Be:

Swim team season begins soon! We will be competing in Division 9 which should be very competitive for us. We are delighted that Ken DiCesare will be returning as our head coach and Lea as our assistant coach. We are also pleased to announce that we have Mark Faherty (a Curl Burke coach) working with us this summer to provide meet strategy and clinics for our swimmers. Lydia Perkins, Monica Bell, Paul O'Hara, and Andrew Hohman will be working with our younger swimmers. The developmental coaches will also be helping out at the B meets. Their collective experience and enthusiasm promise to make for a great season!

In this packet is the registration form, medical release form, and volunteer availability forms. Please fill out the forms and return them at the Swim Team Registration Night on May 1 or to Kathleen McNutt by the same date. We have reserved a room at Mt. Vernon Rec Center for sign-ups and swim suit try-on/purchase. (There will be an additional swim suit try-on/purchase on June 18 during our Blue/White Meet.)

We will communicate primarily by email this summer – so be sure to provide an email address that you check often. There will be a mailbox at the guard desk at the pool, but our main means of communication will be via email.

Please note: Our first practice is on Wednesday, June 1st. Times for after school practice are: 11-18 year olds – 3:30-4:30pm, 10 and unders – 4:30 - 5:30pm, and make-up practice will be from 5:30-6:00pm. Remember to pick your children up promptly from practice so we won't be in violation of the 6:00pm rule (no children under 16 allowed at pool without parent after 6:00pm). We will also have Evening Clinics on June 23, June 30, July 14, and July 28 (for divisional swimmers only). On these evenings, there will be no afternoon practice.

As many of you know, each home swim meet requires the help of 22-25 parents. Please help us and your swimmer by signing up for the swim team jobs and attending a clinic to become certified as an NVSL official. We are always in need of people to serve as referees, stroke and turn judges, starters, clerks of course, table workers, and the all-important concessions stand workers! We will always try to schedule you to work at meets where your children are swimming. However, occasionally we may have to ask that someone work at a meet or send in concession stand items even though their swimmer is not scheduled to swim.

Also, please remember that swim meet selections (swimmer entries) are based on times only!

We have some great things planned for this season including Pasta Potluck dinners on Friday nights before a couple of away meets and the wonderful age group parties.

Any volunteer contributions will be greatly appreciated. If you have any questions, please don't hesitate to ask any of our committee members. We'll see you at the Registration Night on May 1 at Mt. Vernon Rec Center at 5:00-6:00pm!

Susan Crow, HMSTC Board, Swim Team Chair
(703) 765-8356
susancrow2@verizon.net

Your swim team committee is:

HMSTC Board, Swim Team Chair – Susan Crow, Team Rep – Kathleen McNutt,
Assistant Team Rep – Diane Hohman, Treasurer - De Elliott, Social and Activities Chairs – Cindy Peverall

Hollin Meadows Barracuda Swim Team Registration Form

Names – Adult 1: _____ Adult 2: _____

Home Address: _____

Home Phone _____ Work Phone _____

Cell phone _____ Email _____

Alt. e-mail _____

Swimmer #1 _____ Birthdate _____ M F (75.00) \$ _____

Swimmer #2 _____ Birthdate _____ M F (65.00) _____

Swimmer #3 _____ Birthdate _____ M F (55.00) _____

Swimmer #4 _____ Birthdate _____ M F (55.00) _____

Voluntary Contribution - To help offset team costs _____

_____ **TOTAL DUE** \$ _____

Please return this form and a check for the total due made payable to **HMSTC SWIM TEAM** by May 1 to:

Kathleen McNutt at the Mt. Vernon Rec Center from 5-6pm or by mail to:
5914 Benfield Dr.
Alexandria, VA 22310

If you have any questions, please call (703) 317-2190

MEET AVAILABILITY

FAMILY NAME: _____

Please write in the names of the parents and swimmers in your family for each column.

Please mark the grid **ONLY** for meets when you are **UNAVAILABLE**. Mark with an X.

NOTE: If your swimmer's availability changes, please let Kathleen McNutt know at kath.mcnutt@verizon.net.

	Parent 1	Parent 2	Swimmer	Swimmer	Swimmer	Swimmer
MEET						
June 18, Sat Blue/White (time trials) Meet at HM						
June 20, Mon Time Trials at HM vs. Belle Haven						
June 25, Sat "A" Meet at HM vs. Great Falls						
June 27, Mon "B" Meet at Mansion House						
June 29, Wed Ft. Hunt Sportsmans Relays						
July 2, Sat "A" Meet at Brookfield						
July 5, Mon "B" Meet at HM vs. LHP						
July 9, "A" Meet at HM vs. Arlington Forest						
July 11, Mon "B" Meet at HM vs. Riverside Gardens						
July 13, Wed Division Relay Carnival, Brookfield						
July 16, Sat "A" Meet at HM vs. Kent Gardens						
July 18, Mon "B" Meet at Stratford						
July 23, Sat "A" Meet at Fairfax Club Estates						
July 25, Mon IM Invitational Meet						
July 30, Sat Divisionals at Arlington Forest						

Authorization for Emergency Medical Treatment

I am the parent/guardian of _____

Subject to the conditions set forth below, I consent for my child to receive such medical treatment and/or surgical procedures as are deemed necessary in the event of an emergency and to assume liability for any medical expenses involved. This authorization extends to my child's participation in any activity sponsored by or involved with the Northern Virginia Swim League (NVSL) or the Hollin Meadows Swim Team. Should a medical emergency arise during my child's participation in an NVSL or Hollin Meadows Swim Team activity, I understand that reasonable efforts will be made to contact me or my designated alternate at the phone numbers below. If it is believed that my child's life or health may be adversely affected by the delay that an attempt to contact me or my designated alternate would cause, I consent to:

- (i) the administration of medical and/or surgical procedures deemed necessary by the medical doctor and/or medical facility identified or chosen by the NVSL or Hollin Meadows Swim Team adult leader or coach; and
- (ii) the immediate administration of life-sustaining measures deemed necessary under the circumstances.

Health Information:

Allergies: _____ Current Medications: _____

Date of last Tetanus shot: _____ Physical Impairment: _____

Other health alerts: _____

Insurance Company: _____ Policy No: _____

Policy Holder: _____

Father's Name: _____ Mother's Name _____

Work Phone: _____ Work Phone: _____

Address: _____ Address _____

Emergency Contact: _____ Relationship: _____

Daytime Phone: _____ Evening Phone: _____

Preferred Physician/Medical Facility: _____ Phone: _____

Parent/Guardian Signature _____ Date: _____

What We Need to Run a Meet!

Adult 1 (A1): _____

Adult 2 (A2): _____

E-Mail: _____ Alt. e-mail: _____

Home Phone _____ Work Phone _____

Cell Phone _____

Please mark A1 or A2 for all jobs that you are interested in as a volunteer in an official capacity:

Referee _____ **Starter** _____ **Stroke & Turn Judge** _____ **Chief Timer** _____

Chief Table Recorder _____ **Announcer** _____ **Clerk of Course** _____

Have you had training for the above positions within the past two years? Yes No

NVSL Training is required for the jobs above. Clinic dates are listed on the enclosed schedule. Complete descriptions of these jobs is provided in the New Parent Handbook. If you would like a copy please email Susan Crow at susancrow2@verizon.net.

On-the-job training is provided for the following posts; please mark A1 or A2 for any you are willing to do!

Assistant Clerk of Course _____ **Timer (need 10 per meet)** _____ **Marshall** _____

Scorer _____ **Ribbon Writer** _____

Team Area Parent _____ **Photo Day Coordinator** _____

Time Board Worked _____

Concession Stand Salesperson _____ **Food Shopper** _____

Please Note:

Everyone will also be asked to contribute food items for the concession stand (fruit/ veggie trays or brownie/ rice krispie treats) during the season. Concession stand sales are an important part of the swim team: profits are used to purchase items for the Family Breakfast/Swimmer Recognition Awards and to buy trophies for Awards night.

BARRACUDA SCHEDULE SUMMER 2011

- May 1 Registration at Mt. Vernon Rec Center, 5:00-6:00pm, Swim Suit Try-On
- June 1 Afternoon practices begin
3:30-4:30pm 11 & Overs
4:30-5:30pm 10 & Unders
5:30-6:00pm Make-up practice
- June 2-3 Try-outs for new swimmers, 6:00pm or by arrangement
- June 4 NVSL University for starters, referees, table workers, and concessions
- June 10 Pasta Dinner and Welcome for New Families, 6:15pm
- June 16 Team Clinic with Mark Faherty during regular afternoon practice
- June 18 Time Trials at HM (HM only)
- June 20 Time Trials at HM vs. Belle Haven Country Club
- June 22 Morning practices begin
Mon-Thurs: 9:00-9:45am 8-unders
9:30-10:30am 9-12 year olds
10:30-11:30am 13 & Over
Fridays: All ages - 9:30-11:30am
- June 23 Evening Team Clinic with Mark Faherty (no afternoon practice)
- June 24 Team Photos, 9am at the pool
- June 25 A Meet at HM vs. Great Falls
- June 27 B meet at Mansion House
- June 29 Ft. Hunt Sportsman's Relays at Riverside Gardens
- June 30 Laser Tag
Evening Team Clinic with Mark Faherty (no afternoon practice)
- July 1 Pasta Potluck Dinner
- July 2 A meet at Brookfield
- July 5 B meet at HM vs. LHP
- July 7 Age Group Parties
- July 9 A meet at HM vs. Arlington Forest
- July 11 B meet at HM vs. Riverside Gardens
- July 13 Divisional Relay Carnival at Brookfield
- July 14 Evening Team Clinic with Mark Faherty (no afternoon practice)
- July 16 A meet at HM vs. Kent Gardens
- July 18 B meet at Stratford
- July 20 All Star Relay Carnival at Hayfield Farms
- July 21 Team Trip
- July 22 Pasta Potluck Dinner
- July 23 A meet at Fairfax Club Estates
- July 25 IM Invitational (location TBD)
- July 28 Evening Clinic with Mark Faherty for Divisional Swimmers Only
- July 29 Team Recognition and Family Breakfast
- July 30 Divisional Individual Championships at Arlington Forest
Team Awards Night, Family Relays, Dinner and Slide Show
- Aug 7 Individual All Stars, Waynewood

PLEASE NOTE: Practice times. See here

PLEASE NOTE: Evening Team Clinics with Mark Faherty – full team. See here

GO BARRACUDAS!

Barracudas Swim Caps

NEW - ORDER CUSTOMIZED (with family name) CAPS BY MAY 1!

Did you get tired of not being able to find your child's HM cap after a meet or practice last year? I had a lot of repeat customers!

This year you have your choice to order the HM cap with your family name printed on them or to buy the standard HM cap.

Standard HM silicone cap – is \$12.00. You can buy anytime throughout the season. You do not have to order it. I will have a supply all summer.

Customized HM silicone caps with family name are \$15.00 each and must be ordered by May 1. You must order a minimum of 2 per name.

2 caps with name - 30.00 (\$15.00/cap)

3 caps with name – 45.00

4 caps with name – 60.00

ETC.....

(Standard HM caps do not need to be ordered).

I would like to order _____ customized caps at \$15.00 per cap.

Minimum of 2 caps must be ordered with the same name.

Family Name: _____

Please make check payable to “HMSTC Swim Team” and mail or give to:

Diane Hohman
7615 Range Road
Alexandria, VA 22306

If you have any questions – please contact Diane at dihohman@aol.com
or 703-660-8938

Check and order form must arrive by May 1.