CVST SWIMMING

BRING A BUDDY WEEK

March 7-11

SWIMMING IS BETTER WITH FRIENDS!

For the week of March 7-11th, each athlete will have the opportunity to bring a friend to swim one practice with CVST! This is going to be an introduction to the world of swimming, however there are criteria required for each friend to meet before they are allowed to swim that vary by practice group found on the next page. Each practice group will be assigned a day that they are allowed to bring their buddy. If you have any questions about whether or not you think your buddy is appropriate to bring to a practice, please see a coach so we can clarify, for the safety of our athletes and their buddies.

Your buddy's parents are also welcome to come watch the practice and learn more about our team. Each buddy will be required to fill out the waiver attached to this flyer In order to participate. We look forward to meeting everyone and showing off what we're all about here at CVST!

Bronze

If your last name begins with A-L, March 7th is your buddy day.
If your last name begins with M-Z, March 8th is your buddy day.

Criteria:
- must be able to get across the pool without difficulty
- must be able to side breathe in freestyle
-must be able to float on their back

Silver

Buddy day is March 9th

Criteria:
- must be able to swim approximately a 50 without difficulty
- must be able to side breathe in freestyle
- must be able to perform a front flip
- must be able to float on their back

Gold

Buddy day is March 10th

Criteria:
- must be able to swim approximately a 50 without difficulty
- must be able to side breathe in freestyle
- must be able to perform a front flip
- must be able to float on their back

Senior

Buddy day is March 11th

Criteria:
- must be able to get across the pool without difficulty
-must have no difficulty receiving directions

CVST
SWIMMING

Carrollwood Village Swim Team
Bring A Buddy Trial Period Registration

Swimmer's Name: _____ **Age:** _____

Tryout Period: _____**to**_____

Mother's Name: _____ **Phone:** _____

Father's Name: _____ **Phone:** _____

Waiver

By allowing my child(ren) to take part in a trial period with the **Carrollwood Village Swim Association, Inc. (CVST)**, I agree to participate (or allow my child(ren) and family members to participate) in the **Carrollwood Village Swim Association, Inc. (CVST)** activities, and hereby release **Carrollwood Village Swim Association, Inc. (CVST)**, its directors, officers, agents, coaches, and employees from liability for any injury that might occur to myself (or to my child(ren) and family members) while participating in the **Carrollwood Village Swim Association, Inc. (CVST)** program or events, including travel to and from training sessions, swim meets or other scheduled team activities.

I agree to indemnify and hold harmless the above mentioned organizations and/or individuals, their agents and/or employees, against any and all liability for personal injury, including injuries resulting in death to me, my child(ren) and/or other family members, or damage to my property, the property to my child(ren) and/or other family members, or both, while I (or my child(ren) or family members) are participating in the **Carrollwood Village Swim Association, Inc. (CVST)** program.

_____ _____

Parent or Guardian Signature Date

_____

Print Name of Parent or Guardian

Come Swim With Us!
www.CVST.org