



STONE CRABS SWIM TEAM

Established 1991

USA Swimming Coaches Ann & Randy Stone
1085 Crane Crest Way, Orlando, FL, 32825
407-282-4970

StoneCrabs@aol.com www.stonecrabsswimteam.com



2010 SUMMER SWIM TEAM PROGRAMS – SIGN UP

SWIM TEAM & PRESCHOOL SWIM TEAM

Practices every Monday, Tuesday and Thursday from 6:15 to 7:15PM
Children of all ages and abilities welcome to join our USA Swimming Program!
Stoneybrook Residents: \$75 a month, Non Residents: \$85 a month
Registration fee (includes USA Swimming Seasonal 2010 fee & Club Fee) \$60
Swim Team _____ Preschool Swim Team _____

SWIM CAMPS:

June 14-17 _____ July 5-8 _____ July 19-22 _____ August 2-5 _____ August 9-12 _____
_____ 9AM to 12PM DAY CAMP ACTIVITIES – Sports activities and Indoor Fun!
_____ 1PM to 4PM SWIM CAMP – develop swimming skills, water games and splash into fun!
_____ ALL DAY- 9AM to 4PM

Stoneybrook Residents: \$100 for any 3 hour session Non Residents: \$115 for any 3 hour session.
Stoneybrook Residents: \$165 for ALL DAY CAMP Non Residents: \$190 for ALL DAY CAMP.

GROUP SWIMMING LESSONS:

8 classes – limited class size, Classes meet every Monday, Tuesday & Thursday
Class Times: 10AM _____ 5:30 PM _____ 7:15PM _____
Stoneybrook Residents: \$80 Non Stoneybrook Residents \$95
Session 1: June 7-June 24 _____ Session 2: July 5-22 _____
Session 3: July 26-August 12 _____ Session 4: August 16-September 2 _____

PRIVATE SWIMMING LESSONS:

Contact Coach Ann directly at: stonecrabs@aol.com or 407-282-4970
I am interested in Private Swimming Lessons _____ Child(ren)'s Age _____
Level: Beginner _____ Intermideate _____ Advanced _____ Team Member _____

MIDDLE SCHOOL WATER POLO PROGRAM:

Tuesday and Thursday – Time to be announced - _____

Detach and mail registration form to Stone Crabs Swim Team 1085 Crane Crest Way, Orlando, FL, 32825

REGISTRATION FORM:

Name: _____ Date of Birth: _____
Parents: _____ Email: _____
Address: _____ Phone No.: _____
Emergency Contact: _____ Cell No.: _____
Medical Complications/Allergies: _____

I/we the parents(s)/guardian(s) of the above named, hereby give my/our approval for the same to a participate in any and all STONE CRABS SWIM TEAM camp activities. I/we agree to hold harmless the STONE CRAB SWIM TEAM and its representatives for any claim of injury except to the extent covered by accidental or liability insurance.

Parent(s)/Guardian(s): _____ Date: _____

Please contact us at 407-282-4970 or StoneCrabs@aol.com, Please make checks payable to Stone Crabs Swim Team.