



**Join the Fluvanna Aquatic Sports Team this summer and
SWIM FAST**

- Learn to Swim with experienced coaches
- Have fun with lots of social activities for the whole family
- Compete in an environment that promotes personal growth amidst team spirit and good sportsmanship.

**Many practice opportunities to choose from to fit your schedule.
Sign-Up now to make sure you get the session you want. Spaces fill
up quickly.**

The official summer schedule begins Tuesday, May 26th

<u>Day</u>	<u>Time</u>	<u>Practice Location</u>	<u>Preferred Ages</u>
Mon – Friday	6:45 – 7:45am	Camp Friendship	All Ages
Mon – Friday	7:45 – 8:45am	Camp Friendship	All Ages
M,T,Th,F	3:00 - 4:00 pm	Health Nutz	12 and Under
M,T,Th,F	4:00 – 5:00 pm	Health Nutz	12 and Under
M,T,Th,F	5:15 – 6:00 pm	Camp Friendship	All Ages
M,T,Th,F	6:00 – 6:45 pm	Camp Friendship	All Ages
M,T,Th,F	7:30 – 8:30 pm	Health Nutz	11 and Over

Sign up by May 1st and participate in our Sunday Spring Stroke Clinics for free!

Join us this summer as we move into Division I of the Jefferson Swim League. For the past three years we have been the JSL Division III Championship Meet 1st Place team.

Our successful season last year moved us up two Divisions to compete this year in Division I - another first for a Fluvanna Team!

2008 JSL Sportsmanship Award Winner!

www.iswimfast.org

Fluvanna-swimming.org

Jsl.org

FAST Swim Team

P O Box 188, Palmyra, VA 22963

434-326-5533 or Laurie Collins: 589-1528

FAST Summer Registration Form
 Summer JSL Fee - \$90.00 per swimmer
 VISA and MASTER CARD ACCEPTED*

Sessions offered:

CF1	Camp Friendship	6:45 am	All Ages
CF2	Camp Friendship	7:45 am	All Ages
CF3	Camp Friendship	5:15 pm	All Ages
CF4	Camp Friendship	6:00 pm	All Ages
HN1	Health Nutz	3:00 pm	12 and Under
HN2	Health Nutz	4:00 pm	12 and Under
HN3	Health Nutz	7:30 pm	11 and Older

If you don't see the time that fits your schedule or child's age level, please let us know. These sessions are simply a guideline and we can accommodate most families and find a practice session that will work for you.

Swimmer Information:

Last Name	First Name	Date of Birth	Practice Group
Ex. Doe	Johnny	5/8/2000	CF3

Parent Contact Information:

Mother's and/or Father's Name _____

Address: _____

Email address: _____

Phone Number: _____

Mail registrations to P.O. Box 188 Palmyra, VA or come to one of our Swim Season Kick Offs on Saturday May 16th at the Pleasant Grove KITE DAY FESTIVAL

