



Presents

Starts, Turns & Stroke Clinic

About the Clinic:

Empire Swim Clinics are an excellent opportunity to spend focused, quality time on technique, development and refinement in a setting with a low coach to swimmer ratio. Our next clinic will run for four consecutive days beginning Tuesday, April 3rd and ending on Friday, April 6th. This clinic is open to **ANY** swimmers and will be conducted at Ardsley Middle School in Ardsley, NY for the first three days, and at The Hackley School in Tarrytown, NY on the final day. One day of the clinic will be spent on starts and turns, and three days will be spent on stroke technique focusing on:

- **Body Position and Balance** - proper streamline, catch, head positioning, etc. for all four competitive strokes
- **Drills and Skills** - various drills to improve technique and make strokes more efficient
- **Power and Speed** - when to apply effort and at what part of the stroke to ensure the effectiveness of each stroke

The clinic will be led by head coach Ilan Noach and members of the Empire swimming staff.

Clinic Dates:

Ardsley Middle School	April 3rd	5:30 - 7:30 pm	Starts & Turns
Ardsley Middle School	April 4th	5:00 - 7:00 pm	Butterfly Stroke Technique
Ardsley Middle School	April 5th	5:00 - 7:00 pm	Breaststroke Technique
The Hackley School	April 6th	4:00 - 6:00 pm	Backstroke & Freestyle Stroke Technique

Cost:

\$60 per day
\$200 for full series

Registration:

Space is limited and placement in the clinic will be offered on a **first come, first serve basis**.

To register, please e-mail the following information to swimschool@empireswimming.com :

Swimmers Name(s), Age & Date of Birth, Parents Name(s), Address, Phone, and email.

Payment is due at the time of registration and necessary to secure a spot in the clinic. Please make checks payable to "Empire" and mail, with a signed release form, to the address below.

EMPIRE AQUATICS, INC.
"EMPIRE SWIMMING"

LIABILITY RELEASE AND INDEMNIFICATION FORM

I, the undersigned participant and parent, request voluntary participation for minor to participate in all events, which are hereinafter referred to as the "activities," sponsored by **Empire Aquatics, Inc. ("Empire Swimming")**, USA Swimming and its local swimming committees.

I consent to my/minor's participation in the activities and acknowledge that the minor and I fully understand my/minor's participation may involve risk of serious injury or death, including losses which may result not only from my/minor's own actions, inactions or negligence, but also from the actions, inactions, or negligence of others, the condition of the facilities, equipment, or areas where the event or activity is being conducted, and/or the rules of play of this type of event or activity. I understand that if I have any risk concerns, I should discuss the risks associated with my participation with the activity coordinators and event staff, before I sign this document and before any activities begins.

Release – Minor's Rights:

In consideration of allowing Minor Participant to participate in the activities, I hereby release and hold harmless **Empire Aquatics, Inc. ("Empire Swimming")**, The Hackley School, and their members of its board of directors, officers, employees, volunteers, other participants, and agents (collectively, the "Released Parties"), of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that Minor Participant may have or sustain with respect to any and all damage and/or injury, of any type, arising out of his or her participating in the activities. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

(Print name of minor)

(Signature of minor)

(Date)

Release – Parents'/Guardians' Rights:

In consideration of allowing Minor Participant to participate in this event, I hereby release and hold harmless the Released Parties, of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that I may have or sustain with respect to any and all damage and/or injury, of any type, arising from Minor Participant's participation in the activities. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

I certify that my/minor is in good health and have no physical condition that would prevent participation in this activity. Furthermore, I agree to use my/minor's personal medical insurance as a primary medical coverage payment if accident or injury occurs. I consent to emergency medical treatment in the event such care is required.

(Print name of Parent/Guardian)

(Signature of parent)

(Date)

Indemnification by Parent/Guardian:

The undersigned parent/guardian further agrees to indemnify, save and hold harmless the Released Parties from any and all claims, demands, losses, damages and liabilities for indemnities, contribution or otherwise with respect to any damage and/or injury, of any type, arising from Minor Participant's participation in the activities. The undersigned also agrees that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the Releasee and is intended to be as broad and inclusive as is permitted by the laws of the State in which the Event(s) is/are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

(Print name of Parent/Guardian)

(Signature of parent)

(Date)