

# CollegeSwimming Camps

## Dear Coach

One of your swimmers has registered for this summer's CollegeSwimming Camps at Carthage College. We know several reasons coaches are reluctant to have their kids attend summer swim camps, and thank you for the opportunity to work with your swimmers.

We also work hard to uphold our reputation as a camp where coaches can feel comfortable knowing their kids will be challenged, will be well-coached, and will be working on things **YOU** think are important to their development. It is a responsibility we take very seriously.

To help us, could you tell us a bit about your swimmers. This will help us place him/ her appropriately, ensure that we spend some time focusing on areas where YOU feel they need improvement, and help us compliment your training.

Team / School \_\_\_\_\_

Coach Completing Form \_\_\_\_\_

E-Mail \_\_\_\_\_

Swimmer's Name \_\_\_\_\_

# Weekly Practices \_\_\_\_\_

Hr \_\_\_\_\_ min \_\_\_\_\_

Typical Length \_\_\_\_\_ /practice  
Typical Yardage \_\_\_\_\_

### OVERALL

What are a few things you'd really like to see him/her accomplish at or bring home from camp?

### FREESTYLE

What areas do you want to see improvement in?

### BACKSTROKE

What areas do you want to see improvement in?

### BREASTSTROKE

What areas do you want to see improvement in?

### BUTTERFLY

What areas do you want to see improvement in?

### TARGET AREAS

What areas do you believe they need to focus on?

- |   |   |                                   |                                 |                                      |
|---|---|-----------------------------------|---------------------------------|--------------------------------------|
| <input type="checkbox"/> Training-Aerobic   | <input type="checkbox"/> Technique/Drills | <input type="checkbox"/> Kicking  | <input type="checkbox"/> Starts | <input type="checkbox"/> Strength    |
| <input type="checkbox"/> Training-Anaerobic | <input type="checkbox"/> Streamlining     | <input type="checkbox"/> Sculling | <input type="checkbox"/> Turns  | <input type="checkbox"/> Flexibility |
| <input type="checkbox"/> Confidence /Esteem | <input type="checkbox"/> Other _____      |                                   |                                 |                                      |