

MANITOBA MASTERS AQUATIC CLUB

Information and Goal Sheet

In an effort to better serve our members, the coaching staff has developed this form that will indicate what you would like to achieve out of swimming and what you expect. Please fill out the form and hand it in to your coach of choice.

Name: _____

DOB: _____ _____ _____

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Please indicate which practices you usually attend

Mon a.m.	_____		
Tue a.m.	_____	Tue p.m.	_____
Wed a.m.	_____		
Thu a.m.	_____	Thu p.m.	_____
Fri a.m.	_____		
Sat a.m.	_____		
Sun a.m.	_____		

Please indicate your preferences

_____ I would like the coaches to work with me on stroke correction

_____ I am interested in competing and would like to get faster

_____ I am interested in competing but only for fun and personal interest

_____ I am in interested in staying in shape by training but not competing

_____ I am interested in swimming just to stay fit and not to train hard

_____ I may be interested in competing once I become more fit and proficient

Please use the remaining space to inform the coaches as to what you would like to accomplish this season and how they could assist you

(to indicate your goal times please download the Goal Time Sheet from the website)