



Franco's Schooners

is a recreational summer swim team that participates in the SRSA (Scenic River Swim Association).

Our summer program is designed for **diverse ability** and **motivational levels** to give each individual a **unique swimming experience**.

The program offers **superior stroke instruction**, with focus on improvement and **having fun!**

The Schooners compete against **local swim teams** in West St. Tammany Parish.

The staff is committed to giving each swimmer the **positive benefits** swimming can offer.

Franco's Schooners program:

- IMPROVE STROKE TECHNIQUE
- BECOME A STRONGER SWIMMER
- QUALIFIED STAFF
- WATERSLIDE
- FIELD TRIPS
- FRIENDLY COMPETITION
- TEAM MOVIE DAYS
- ICE CREAM PARTIES
- HAVE FUN!!!!

JOIN SCHOONERS!

The MOST Flexible & Fun Swim Team on the Northshore!

Franco's has been voted BEST Swim Club...

2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017!!!

Schooners 10-Week Swim Program begins May 14

2018 Practice Schedule:

Beginning **Monday, May 14**

Monday - Thursday 7:00pm - 8:00pm

Beginning **Tuesday, May 29** adding morning practices:

Monday - Friday 9:00am ages 8 & under

Monday - Friday 10:00am ages 9 & over

PARENT ORIENTATION MEETING:

TUESDAY, MAY 15 at 7pm or WEDNESDAY, MAY 30 at 10am

SRSA Swim Meets:

| | |
|---------------------------------------|--|
| Thursday, May 24 | Intersquad Fun Meet @ Francos |
| Thursday, May 31 | Dual Meet vs. T-Birds @ Francos |
| Wednesday, June 6 | Dual Meet vs. Beau Chene Sharks @ Beau Chene |
| Tuesday, June 12 - Wednesday, June 13 | SRSA Divisionals @ Francos |
| Wednesday, June 20 | Dual Meet vs. Pelicans @ PAC |
| Friday, June 29 | Cluster Meet @ Francos |
| Friday, July 6 | SRSA Championships @ Francos |

SCHOONERS SUMMER SWIM TEAM INFO

www.francosschooners.com

Robby Fritscher at 985.792.0274 or rfritscher@myfrancos.com



Schooners Summer Swim Team

Swimmers Name: _____ Birthday ____/____/____ M / F
First Middle Last

Swimmers Name: _____ Birthday ____/____/____ M / F
First Middle Last

Swimmers Name: _____ Birthday ____/____/____ M / F
First Middle Last

Parent Information:

Mother: _____ Email _____ Cell: _____

Father: _____ Email _____ Cell: _____

Address: _____

Franco's Membership Acct # _____

Areas I can assist: ___ Timing ___ Data Input ___ Hospitality ___ Set Up ___ Social

My child's photograph may be used on Franco's printed material, websites & social media Yes / No

Program Payment

Members ___ 1 swimmer \$215 ___ 2 swimmers \$415 ___ 3+ swimmers \$615
Non-Members ___ 1 swimmer \$265 ___ 2 swimmers \$465 ___ 3+ swimmers \$665

I understand that my payment for the full amount is non-refundable. **Initial here:** _____

___ Charge my member account ___ Check ___ Credit Card ___ Cash

| | | |
|--|---|-------------------------------|
| For Office Use: | Payment Method | Account Holders Int'l's _____ |
| ___ Check (Make checks payable to Franco's Athletic Club) | ___ Credit Card Please Circle: Visa MC AMEX Disc | |
| ___ Membership Charge Account # _____ | C.C. Number _____ Exp. _____ | |

Club Waiver Release

All signed participants desire to voluntarily utilize the services and, if applicable, facilities and equipment provided by Franco's Athletic Club. As a consideration for the right and privilege of being permitted access to Franco's Athletic Club, and if applicable, facilities and equipment, the undersigned does hereby release Franco's Athletic Club, and employees from any and all liabilities of any kind whatsoever arising out of any physical or mental injury or damage incurred or sustained by the undersigned, minor child, of the undersigned, or the undersigned property, while voluntarily preparing to use, using or cleaning up after using, any of the services and applicable facilities and equipment provided by Franco's Athletic Club; and furthermore, agrees to save and hold harmless Franco's Athletic Club, its owners, agents, and employees, for any damages or injuries arising out of the undersigned's, or the undersigned's minor child, use of the facilities, equipment and/or services. Furthermore the undersigned acknowledges that he or she has obtained independent medical approval to use the services, facilities and equipment provided by Franco's Athletic Club for themselves, or for their minor child, and that he or she has made Franco's Athletic Club aware of any limitations suggested by his/her physicians. The undersigned acknowledges and affirms that he or she has carefully read this release and has asked and obtained a satisfactory explanation of any part that he or she does not understand. The undersigned acknowledges that photos may be taken for publicity/marketing purposes and gives his/her authorization for any photos of his/herself, or of their minor child, to be used in this fashion.

Participant Signature _____ Date: _____