

Blue Wave Masters Swim Team

Our Masters program is designed to help swimmers improve fitness and/or train for specific goals, and offer active support for a healthy lifestyle through friendship and camaraderie. The Masters program is open to all adult swimmers 18 and over (fitness, triathlete, competitive, non-competitive) who are dedicated to improving their fitness through swimming. Masters swimming offers a structured practice with a certified coach. The masters team is an extension of the year round Blue Wave Swim Team that swims at the pavilion. **The practices would begin Monday September 14, 2009. The month of September would be a free trial to try it out, and payments would begin on October 1. All swimmers need to be registered with USMS by the first week of October.**

SCHEDULE OPTIONS:

You can choose which practices to attend

Mornings	
Monday	5:00-6:00am
Wednesday	5:00-6:00am
Friday	5:00-6:00am

Afternoons	
Tuesday	12:00-1:00pm
Thursday	12:00-1:00pm

Evenings	
Tuesday	8:00-9:00pm
Thursday	8:00-9:00pm

PRICING:

There are two different payment options:
We will also be assessing a \$25 registration fee per person

Punch card option: 10 practices per punch card:

\$95 for Residents \$120 for Non Residents

After the punch card is full you would need to renew the card by paying again

Monthly fee option: Pay in advance for the entire month and come to as many practices as you like during the month. Monthly fee would be renewed each month unless you opt out:

\$152 for Residents \$192 for Non Residents

How to Register with USMS: the registration form is attached and would need to be returned to USMS by the first week of October. Swimmers need to register as "Unattached" for now until BWST is registered as a team. The fee is \$25 and the registration would be good until Dec 31, 2009. Then you would need to register again in January 2010, which would cost \$33.

Blue Wave Masters Swim Team Registration Form

Name:

Mailing Address:

Phone Number:

Email Address:

I would like to pay by (circle one):

Check or Credit Card

If paying by credit card please fill out the following information

If paying by check please make payable to AVCA

Monthly payments using credit cards will be charged the 1st of each month

TOTAL AMOUNT DUE:

Name:

Type of Card (Visa, etc):

Card Number:

Exp. Date:

Signature:

RETURN FORM TO:
BLUE WAVE SWIM TEAM
20585 ASHBURN VILLAGE BLVD.
ASHBURN, VA 20147