



Bedford Area Family YMCA
1111 Turnpike Road
Bedford, VA 24523
barracudas.bay@gmail.com
P 540-586-3483
www.bedfordymca.org



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Summer Swim Meet Schedule

6/9 @ Vista Acres
9/16 @ Boonsboro
6/23 @ Wildwood
6/30 @ FAST
7/7 @ Amherst
7/14 @ Falling River
7/19 B-Meet @ Peakland
7/26 A-Meet @ Bedford

BARRACUDA



@bedfordymcaswimteam

@bedfordymca

@bedford.ymca

The season starts in May!

Swimming Requirements:

All perspective swimmers must complete a swim test that includes treading water and a timed 25 yard swim. Any swimmers who do not pass may not be permitted to join the swim team.

Focus for Team Swim:

Our program is focused on developing the kids as swimmers while also instilling confidence and work ethic so our kids grow into successful young men and women. We will improve conditioning as well as break down each stroke and work on proper technique and good form so that each swimmer can get the most efficiency from the strokes. This is the foundation of swimming. Our goal is not to be the FASTEST, but the MOST EFFICIENT in the water.

ALL parents will be asked to volunteer at ALL swim meets

Please check your email regularly; this is the main form of communication between coaches and parents.

** Membership:

Youth Memberships are \$21 per month, there is no Joiner's Fee for Barracudas. All memberships require 30-Day written notice to cancel.

Cost of being a Barracuda

****All Barracudas must be Bedford YMCA members ****

- All monthly payments must be set to auto payments
- There is a \$30 charge for any returned payments
- Barracudas cost is \$40 for May. \$60 per month for June and July. \$140 if paid in full for the season
- Bedford County High School Swim Teams get \$5 discount per month or \$20 discount for whole season.
- Sibling discount is \$10 off per month, no discounts on the paid in full price.

Practice Schedule For Summer Swim:

Starts May 6th
Monday-Thursday
5:30pm-6:30pm

For any questions, please email Coach SJ Boone at barracudas.bay@gmail.com

SWIMMER INFORMATION circle one

H.S Swimmer

Barracuda

Swimmer's Name:

Date of Birth: ____/____/____ **Age:** ____

Address: _____

T-Shirt Size: _____

Guardian's Name:

Guardian's E-mail address:

Emergency phone numbers:

I understand the requirements & policies; & this registration is made with the understanding that the Bedford YMCA, its directors, staff, & volunteers are not responsible for any sickness or injury sustained while attending swim team practice and/or meets.

Guardian Signature

Date