

FAST Tryout Evaluation

Please bring this form with you for the tryout. It allows us to assess your child and make a group recommendation based on that assessment.

The coach may have your child swim for as little as 15 minutes or for the entire workout, depending on the child's ability.

DATE OF TRYOUT: _____

SWIMMER'S NAME: _____ AGE: _____ BIRTHDAY: _____

SUMMER TEAM: _____ REFERRED BY: _____

	Good	Average	Needs work
Listening skills			
Follow instructions			
Streamlines			
Comfort level			
Free			
Back			
Breast			
Fly			
Kick			

PARENTS NAME: _____

EMAIL: _____



Keep in mind this is an Olympic year, and as such there is an increase in interest.
Register early to avoid being shut out.

SUGGESTED GROUP

Development	White group	Blue group	Red group	
D I D II	W I W II	B I B II B III	R I R II	LESSONS

If your child isn't ready for one of our programs, don't worry. Our primary goal is that children are ready and capable of meeting the challenges of the group. An overwhelmed child in deep water is a risk none of us can afford to take. The safety and well being of your child always comes first. We're here when your child is ready.