

Columbia Gorge Masters / Oregon Masters Swimming

USMS Mentor Coach & Swimmer Clinic

Sanctioned by Oregon Masters Swimming, Inc. for USMS, Inc. - Sanction #376-01C

Dates: Sunday, November 12, 2006

Location: Hood River Aquatic Center, 1601 May Street, Hood River, OR 97031
Classroom at Oregon State University Extension Office, 2990 Experiment Station Drive, Hood River OR 97031

Clinic Director: Sandi Rousseau, Columbia Gorge Masters and Hood River Valley Swim Team

Eligibility: You must be a registered USMS member or USA-S coach to attend. **Swimmer clinic limited to the first 20 people signing up.**

Event Details: Columbia Gorge Masters will be hosting a USMS Coach & Swimmer Mentor Clinic. The goals of the clinic are: (1) to help swimmers improve technique in the water, and (2) to get coaches together to share ideas and learn from each other.

Coaches Topics: Structuring Workouts for Different Levels of Swimmers
Differences in Training Masters and Kids
Working with Triathletes: How to and How Much to Cater to Their Needs
How to Videotape and Critique Effectively

Swimmer Topics: Dry land Training
Freestyle Technique
Full Body Check-up Drills (all four strokes)
Videotaping (Freestyle/Possibly Choice of Stroke dependent on time constraints)

Coaching Staff: The Mentor Coach will be Kerry O'Brien from Walnut Creek Masters in California. Kerry has coached over 30 years in both age group and Masters programs and is currently Head Coach of Walnut Creek Masters, a team of over 450 swimmers. He is a recognized expert in the field of coaching as well as an accomplished swimmer. Kerry is a Level 5 Masters ASCA Coach, recipient of the 1987 USMS Coach of the Year, 1992 Pacific Masters Coach of the Year, and 2000 Masters Aquatic Coaches Association 'Lifetime Achievement Award', and has been a two time coach at the US Masters Altitude Training Camp in Colorado Springs, CO.

Schedule: Sunday 7:45 - 8:15 AM - Coaches Registration (OSU Extension Office – 5 min from pool)
8:15 -10:30 AM - Coaches' Session (OSU Extension office)
10:30 - 11:30 AM - Break / Travel to Pool / Pool Demo Session
11:30 - 12:00 Noon - Coaches' Lunch
11:30 - 12 Noon - Swimmer Registration
12 Noon - 5 PM - Swimmer Presentations/Videotaping/Review

Accommodations (if arriving on Saturday):

- 1) HOST (House Our Swimmers Tonight): Stay with a local swimmer. Contact Sandi Rousseau (contact info below)
- 2) Sandi and Tom's 'Floor' B&B (without breakfast): Sleep free on mats on the floor (house & shop available). Contact Sandi.
- 3) Hood River B&B: Owned by Masters Swimmer Jane Nichols, jane@hoodriverbnb.com or 541-387-2997, 3 min from pool.
- 4) Best Western Hood River Inn: 541-386-2200; Rates:\$89-109 (1-2 beds 'River' and 'No River' views; Off I-84 along Columbia River; 5 min from pool.

Cost:

Coaches: Free (includes lunch and expected to assist in the afternoon swimmer session) **Swimmers: \$20**
Oregon Masters Swimming is underwriting the cost of this clinic.

Questions: Contact Sandi Rousseau at 541-354-2580 or swim@gorge.net. Confirmation of registration and additional information will be sent to you after the registration form, USMS registration card, and check are received.

**Send (1) registration form, (2) copy of your USMS registration card, & (3) check payable to Oregon Masters Swimming to:
Sandi Rousseau, 4179 Willow Flat Road, Hood River, OR 97031**

Name: _____ Swimmer(✓) _____ Coach(✓) _____
Address: _____ City _____ State _____ Zip _____
Telephone: (H) _____ (W) _____ (Cell) _____
E-mail address: _____ Club or Team _____ USMS #: _____

"I, the undersigned participant, intending to be legally bound, hereby certify that I am physically fit and have not been otherwise informed by a physician. I acknowledge that I am aware of all the risks inherent in Masters swimming (training and competition), including possible permanent disability or death, and agree to assume all of those risks. AS A CONDITION OF MY PARTICIPATION IN THE MASTERS SWIMMING PROGRAM OR ANY ACTIVITIES INCIDENT THERETO, I HEREBY WAIVE ANY AND ALL RIGHTS TO CLAIMS FOR LOSS OR DAMAGES, INCLUDING ALL CLAIMS FOR LOSS OR DAMAGES CAUSED BY THE NEGLIGENCE, ACTIVE OR PASSIVE, OF THE FOLLOWING: UNITED STATES MASTERS SWIMMING, INC., THE LOCAL MASTERS SWIMMING COMMITTEES, THE CLUBS, HOST FACILITIES, MEET SPONSORS, MEET COMMITTEES OR ANY INDIVIDUALS OFFICIATING AT THE MEETS OR SUPERVISING SUCH ACTIVITIES. In addition, I agree to abide by and be governed by the rules of USMS."

Signature: _____ Date: _____