



# STROKES AND STRIDES

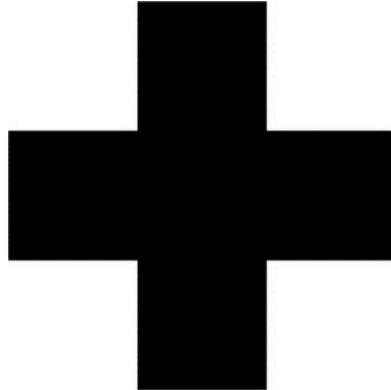
## Youth Aquathon at Bohrer Park

### Swim and Run Event

Sat. May 30, 2014 – 8:00am-12:00pm

#### EVENT INFORMATION:

Strokes and Strides is a one-time Swim and Run event for youth ages 7 through 14 (divided into two age groups). This is a noncompetitive program and is intended to introduce young athletes to the Aquathon experience.



Events for ages 7-10 include a 50 meter swim (any stroke) followed by a 1 kilometer run; events for ages 11-14 participants include a 100 meters swim (any stroke) followed by a 2 kilometer run. Swimming events will take place at the recently renovated Water Park; the running portion of the program will take participants through a marked trail in Bohrer Park. All participants will receive a completion award following the event and a free daily admission pass to the Water Park to be used in the 2014 season. The event will be held rain or shine and will not be rescheduled if cancelled.

Age Group	Swim Distance	Run Distance	Activity #	City Resident Fee	Nonresident Fee
7-10 years old (on day of event)	50 Meters	1 Kilometer	41444	\$23	\$30
11-14 years old (on day of event)	100 Meters	2 Kilometers	41445	\$23	\$30

\*\*\*Volunteer parents are needed as timers and trail chaperones. Please contact Dave Ludington at 301-258-6350 / [dludington@gaitHERSBURGMD.GOV](mailto:dludington@gaitHERSBURGMD.GOV) for more information.\*\*\*

#### LOCATION:

The event will begin with an 8 a.m. check-in at the Gaithersburg Water Park (512 S. Frederick Avenue Gaithersburg MD 20877). Please be on time! Immediately after check-in, the program will start with the swimming heats followed by the running portion of the program. Families are welcome to watch the event at the Water Park, and/or along the running course. A brief post-event celebration will be held at the Hillside Pavilion at Bohrer Park.

#### REGISTRATION INFORMATION:

You may register **on-line** at [www.gaitHERSBURGMD.GOV/recxpress](http://www.gaitHERSBURGMD.GOV/recxpress) or **complete** the registration form included with this flyer. You can register using this form **in person** at the Activity Center (506 S. Frederick Ave.), **by fax** (301-948-8364), or **by mail** (506 S. Frederick Ave. Gaithersburg MD 20877). Payment is due at the time of registration. Make checks payable to: "The City of Gaithersburg." **Registration Deadline: 5/20/15** – No Registrations Accepted on Day of the Event.

**NOTIFICATION:**

You will not be notified unless there is a problem with your registration or if the class is cancelled; otherwise you should attend the first class at the date, time, and location listed in the class schedule.



*Gaithersburg*  
A CHARACTER COUNTS! CITY

**CONTACT INFORMATION**  
**Activity Center at Bohrer Park**  
506 S. Frederick Ave  
Gaithersburg MD 20877  
301-258-6350

**REGISTRATION FORM****FAX REGISTRATION to 301-948-8364**

Check here if new address/phone since last time registered. **E-mail:** \_\_\_\_\_

Payer's Last Name: \_\_\_\_\_ Payer's First Name: \_\_\_\_\_ M  F

Address: \_\_\_\_\_ City, State Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ City Resident  Non-Resident

Participant's Name Last, First	Sex M/F	Birthdate M/D/Y	Age on 6/1	Activity Name	Activity #	Start Date	Day	Time	Cost
<i>Example: Doe, John</i>	<i>M</i>	<i>01/05/06</i>	<i>8</i>	<i>Aquathon</i>	<i>41444</i>	<i>5/30</i>	<i>Sat.</i>	<i>8am</i>	<i>\$23</i>

**TOTAL: \$** \_\_\_\_\_

Through the registration process, I hereby grant permission for me/my child to attend the activity sponsored by the City of Gaithersburg. I understand that I am responsible for me/my child's insurance in case of injury. Furthermore, I understand that although safety precautions will be observed, the City of Gaithersburg, employees and agents will not be responsible for any personal property lost by me/my child or for any injury sustained in the program. I also consent to the City's use of any photographs and/or video tapes made of the program.

\_\_\_\_\_  
**Print Participant Name(or Parent/Guardian if under 18)**

\_\_\_\_\_  
**Signature of Participant (or Parent/Guardian if under 18)**

*The City of Gaithersburg is committed to making reasonable accommodations as required by the American with Disabilities Act. Requests must be made two weeks prior to the start of the program. Please call 301-258-6445 to indicate what accommodations are needed.*

Amount Paid: \$ \_\_\_\_\_  Cash  Check # \_\_\_\_\_

Visa/MC/AMEX/Disc # \_\_\_\_\_ Exp Date: \_\_\_\_/\_\_\_\_

Signature (name on card) \_\_\_\_\_

Print Name \_\_\_\_\_

**OFFICE USE ONLY:**

Received: \_\_\_\_\_ Initials: \_\_\_\_\_

W P M F Resident? Y N

Processed: \_\_\_\_\_ Date: \_\_\_\_\_