

# Providence Swim Camps '08

at Providence College, Providence, Rhode Island

August Session Added!

Monday-Friday, August 18-22

**Traditional Instructional Camp.** Providence Coach John O'Neill continues the longest running Swim Camp program in Rhode Island history. Campers (Ages 8 & older) will receive extensive stroke, start and turn work in a fun and motivating environment. In addition to pool workouts, dryland and classroom sessions are held. *Swimmers must have previous competitive swim experience (at least one season on a swim team).* Camp Director: John O'Neill, Head Coach, Providence College and the Little Rhody Aquatic Club. Coach O'Neill brings over 25 years of college, age group and club coaching experience to his camps. Formerly Head Coach at West Point (5 years), the Providence College (18 years) Head Coach has been recognized as Patriot League, Big East, New England, and National Catholic Coach of the Year. O'Neill has directed camps and clinics for over two decades, including those featuring Olympic Gold Medalists Rowdy Gaines, Mike Barrowman and Head Olympic Swim Coach Don Gambriel.

Campers will have the opportunity to train and use the facilities at Providence College in Providence, RI. Campers should arrive between 8:00-8:30 AM and will be available for pick-up at 3:15-3:30 PM. *(The last day of camp, Pick-up is at 11:15 AM).* Cost – \$199.00. Deposit: \$99.00 due with Registration. A 10% discount is available for all those who register and pay in full. Campers should bring a lunch each day, or money to purchase one in the Dining Hall at Providence (Mon.-Thurs). All campers will be provided a Camp Swim Cap and Camp T-shirt. **Medical** – Parents and/or Guardians must make sure each camper has passed a physical examination within one year of attending our camp. Each camper is covered by a group accident policy, which *supplements a claim beyond personal insurance only.* You will receive all medical and waiver forms and they must be returned Prior to enrollment.

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**Registration Slip – Please Print**

**August Session**

**Camper's Name** \_\_\_\_\_ **Age** \_\_\_\_\_

**Address** \_\_\_\_\_

**Parents Names** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Swim Team** \_\_\_\_\_

**Please make checks payable to: LRAC and return to Swim Office, Athletic Department,  
Providence College, Providence, RI 02918 Questions?? Please email us at  
[joneill7@providence.edu](mailto:joneill7@providence.edu) or call the swim office at 401.865.2268.**