

SWIM TEAM

The City of Glidden will be sponsoring the Glidden Swim Team for boys and girls 5-18 years of age (recommended to be able to swim the length of the pool). The team meets daily Monday, Wednesday, Friday for practice and Tuesday, Thursday for meets. Swim team practice will begin on Tuesday, May 27th. Practice times will be: 10:30-11:45am 11yrs and up, 11:45-12:30pm 10yrs and younger. Please remember that swim team is not a substitute for swim lessons. Encourage your child to take swimming lessons also.

Early Bird registration ends May 21st (additional \$10.00 fee after May 22nd)
Return registration form & fee in the Glidden City office drop slot.
Payable to City of Glidden - \$40.00 Aquatic Center member (membership paid at registration).
\$70.00 non-member
Late registration ends Friday, May 30th.

Swim Meet Schedule 2025

- Tuesday, June 3– at Home Manning
- Thursday, June 5 at Sac City
- Tuesday, June 10– at Lake City
- Thursday, June 12– at Home Manning
- Tuesday, June 17–at Home Denison
- Thursday, June 19-at Carroll
- Tuesday, June 24– at Guthrie Center
- Thursday, June 26– at Perry
- Tuesday, July 1– at Home Jefferson
- Saturday, July 12–Conference meet TBT 11:00am
- Rain Date -July 13, 2025



Glidden Swim Team - Summer, 2025

Fee: Payable to City of Glidden -\$40.00 Aquatic Center member (membership paid at registration)
\$70.00 nonmember
Mail fee and form to: City of Glidden, P.O. Box 349, Glidden, IA 51443

Swimmer's Name _____

Age (as of June 1st) _____ Birth date _____ Grade Completed _____

Parent/Guardian Name _____

Street/City Address _____

Home phone _____ Daytime phone _____

E-mail Address _____

Medical conditions? _____

Waiver-I agree to assume full responsibility for any risk implicit or direct by participating in any activity or facility. The City of Glidden does not provide individual, team, or group accident insurance for participants in Parks and Recreation activities. The individuals mentioned above have my permission to participate. I also give permission for any photos, of these participants taken during the program, to be used for future Department promotional materials.

Parent/Guardian _____ Date _____

Member registration fee is \$40/non-member fee is \$70 per child if returned to the City Office by May 21st: No registrations accepted after May 30th. No refunds. May conflict with other recreation programs.

OFFICE USE: Received _____ Check _____ Cash _____ Amount \$ _____ Member # _____