

**SECTION 3**

**NEW CANDIDATES FOR THE CREW TEAM ONLY:**

**Swimming Aptitude Test: Please read the following and sign this permission slip for your child to be eligible to try out for the Shrewsbury High School Crew Team.**

Rowers need to be comfortable in the water and not have to touch bottom- some parts of our lake are over 100' deep. In the spring season we do not have access to a test site for this swim test. Therefore, please sign and ***return the bottom of this form to the coach within the first 3 days of tryouts.***

Note: In the fall, we have kept students off the team because they were not able to adequately perform the following test. Please read carefully and make an honest assessment of your child's ability, for their safety and the safety of others in their boat. In this test, candidates cannot hold onto the dock or stop swimming unless instructed to do so. To reiterate, if you think your child would have difficulty with this test, please have them consider doing another sport.

**SHS Crew Swim Test:**

- Back float for 1 minute,
- Treading water with hands above water (using only their legs and feet to keep up) for 1 minute,
- Survival floating (minimal movement in face down jelly fish position, with gentle push up to get breath every 10-20 seconds) for 5 minutes, and
- Freestyle swimming for 10 minutes non-stop.

*Cut on this line and keep the top for your records. Have your child hand in the signed section below.*

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- ◇ Back float for 1 minute,
- ◇ Treading water with hands above water (using only their legs and feet to keep up) for 1 minute,
- ◇ Survival floating (minimal movement in face down jelly fish position, with gentle push up to get breath every 10-20 seconds) for 5 minutes, and
- ◇ Freestyle swimming for 10 minutes non-stop

I confirm that \_\_\_\_\_ can perform the SHS Crew Swim Test.  
*Child's Name*

I fully understand that the Town of Shrewsbury and its agents cannot be held liable in case of an accident in the water. I also understand that all involved personnel will do everything in their power to be reasonable and prudent, and not put your child in danger.

\_\_\_\_\_  
*Parent or Legal Guardian*

\_\_\_\_\_  
*Date*