



May 27, 2026

Parents,

Welcome to the 17th season of the Florence Summer Swim League. We are glad to be able to get back in the pool and on the deck. We are looking forward to what this summer will bring and watching our swimmers grow as the season unfolds!

We are excited to have these teams participating this season. The Country Club of South Carolina, Florence Country Club, Hartsville YMCA, McLeod Health and Fitness Center and Sumter Aquatics Center. We plan to have 4 meets this season ending with a Championship meet on July 11th at Country Club of South Carolina.

WE NEED YOUR HELP!

We are always looking for volunteers to serve as timers and officials for meets.

If you are interested in serving on the FSSL Board of Directors, feel free to let us know.

Please complete all waivers in this packet, as well as the code of conduct, and media release. Please return everything to your coach once completed.

As we look forward to a great season, we thank you for your support. If you have any questions, email us at florenceswimming@gmail.com.

Sincerely,

Jennifer Calcutt

Here is our 2026-2027 Board of Directors! Please let us know how we can help you!

Jennifer Calcutt, President	Rita McInville, Parent Representative
Jan Chatlosh, Vice President	Grayce Howard, Marketing
Kimrey-Ann Haughn, Treasurer	Jessica Beach, Member at Large
Jessica Crowson, Secretary	Maegan Mattis Member at Large
Tim Shannon, Coaches Representative	Jennie Loyed, Member at Large

Florence Summer Swim League 2026 Meet Schedule

DATE	MEET	LOCATION	Warm-Up Times	Meet Starts
Thursday, June 11 th	Meet #1	McLeod	5:00pm	5:30pm
Thursday, June 18 th	Meet #2	Hartsville YMCA	5:30pm	6:00pm
Monday, June 29 th	Meet #3	Sumter	5:30pm	6:00pm
Saturday, July 11 th	League Championships	CCSC	8:00am	8:30am

Swimmers Name: _____

Parents Name: _____

Please check which swim meets your swimmer will be able to attend. If you are unable to make a certain meet and have already checked that you will be attending, please let your coach know. To help our swim meets run more smoothly, we are asking that parents sign up to volunteer at 2 swim meets this season.

Meet Information

Meet 1- Thursday, June 11th
McLeod Health & Fitness

Attending

Y/N

Volunteering

Y/N

Meet 2- Thursday, June 18th
Hartsville YMCA

Y/N

Y/N

Meet 3- Monday, June 29th
Sumter Aquatics Center

Y/N

Y/N

Meet 4- Saturday, July 11
Championship Meet

Y/N

Y/N

Swimmer's Name _____

Team: Sumter Aquatics Center

Florence Summer Swim League Code of Conduct



Participant:

Please Print Name

Participant Assumption of Risk and Release

In agreeing to participate at The Country Club of South Carolina (CCSC) Pool, affirm that my general health allows that I may participate in using the facility under own supervision and risk. I am aware of the limitation(s) that my general health may place on performing (swimming) exercise of a vigorous nature and/or my responsibility for seeking medical advice in that regard.

In consideration of participating at the CCSC do hereby agree to assume risk of such injury end hold harmless The Country Club of South Carolina as well as the management Royal Park, LLC from any and all liability, actions, causes of action, claims and demands of every kind and nature whatsoever which I now have or which may arise out of or in connection with my use of the pool at The Country Club of South Carolina. I further indemnify The Country Club of South Carolina and related entities against any and all injuries that may be Incurred by myself 01 ~~ponsored~~ guest. The terms hereof shall serve a release and assumption of risk for my heirs, executors and administrators as well as for all members of my family, including minors.

I have read this agreement and understand the exercise (swimming) in which will be engaged. I have agreed to the conditions stated above.

Participant Signature

Date

McLeod Health and Fitness Center Waiver and Release of Liability

1. In consideration of my obtaining membership and being allowed to use the facilities and equipment of McLeod Health and Fitness Center (MHFC). I waive any right I may have in the future to make a claim against MHFC, its managers, employees, instructors, or agents, resulting from ordinary negligence on the part of MHFC and those listed. This waiver extends to any type of personal injury I might sustain in my use of the facilities of MHFC and any theft of personal property of mine lost on the premises. This Agreement shall operate as a release of any liability of MHFC and those listed for any claim that may develop arising out of ordinary negligence in the operation of MHFC.
2. I understand that strength, flexibility and aerobic exercise, including the use of equipment involves risk of injury. I am voluntarily participating in these activities and using the equipment with knowledge of the dangers involved. I assume the risk of injury that might happen to me by using the facilities and participating in the programs of MHFC.
3. I represent to MHFC that I am physically fit to participate in the activities and programs of the Center and that I will not extend myself beyond my abilities, or if I do so, it will be at my own risk.
4. I have been informed that I should consult with a physician concerning my participating in any exercise program and obtain from a physician's advice as to how I should periodically update my state of physical condition with physician, I either have obtained such advice from a physician or acknowledge that I have decided to participate in exercise programs without obtaining the advice of a physician.
5. I understand that the Wavier and Release of Liability above stated is broad terms. If portion of this Waiver and Release of Liability is held invalid, the remainder will continue in effect.
6. I have read this Waiver and Release of Liability and understand the rights I am giving up by signing it. .

Date

Name of Participant (Please Print)

Support your swimmer and become a League Sponsor

(Open to all parents and/or businesses)

Ads in the Championship Heat Sheet can be used to wish your swimmer or team good luck in the meet,

or to promote your business.

Senior (\$25) Your business name will be listed on the sponsor list in the Championship Heat sheet.	Bronze (\$50) You will receive a 1/4-page ad in the Championship Heat sheet and your business name will be listed on the sponsor list in the Championship Heat sheet
Silver (\$100) You will receive a 1/2 page ad in the Championship Heat sheet and your business name will be listed on the sponsor list in the Championship Heat sheet	Gold (\$250) You will receive a full-page ad in the Championship Heat sheet, and your business name will be listed on the sponsor list in the Championship Heat sheet

Complete this form and return with payment for sponsorship to your coach or board member by June 26th.

_____ Yes, I would like to be a FSSL sponsor, at the _____ level. I have attached a check, payable to FSSL, in the amount of _____.

Name _____ Phone _____

Email _____ Team _____

The person, or family, or business you would like to appear when sponsors are listed on each heat sheet: _____.

If you make a donation and wish to remain anonymous, please check here _____.

Ads
Ads may be personalized in support of your team, a swimmer, or to promote your business. If you are submitting an Ad, please email us a mockup of the logo or artwork in PDF form to janhchat@gmail.com.

Thank you, FSSL Board



PHOTO/ AUDIO VISUAL NARRATIVE RELEASE

I am 18 years of age or older and, if not, my Mother/Father/Legal Guardian has also signed below.

My Consent. For my participation in activities to be conducted by the National Council of Young Men's Christian Associations of the United States of America (YMCA of the USA), and/or YMCA of the Upper Pee Dee I give my consent, now and for all time, to YMCA of the USA, YMCA and collaborating third parties to make, reproduce, edit, broadcast or rebroadcast:

- video film or footage of me, • sound track recordings of me • photo reproductions of me
- any narrative account of my experience

My consent gives permission to use the above materials for publication, display, sale or exhibition in promotions, advertising, education and legitimate business uses. Use includes reproductions in any form and media, adaptations and/or revisions, throughout the world and forever.

I understand and agree there may be no compensation for this, and I will not make any claim for payment of any kind. I may, or may not be, identified in such reproductions; however, my name will not be used to endorse any particular commercial products or commercial services.

Ownership, Confidentiality, and Shared Use. With respect to any of the above uses, I further agree:

- All uses shall belong to YMCA of the USA and YMCA and either may share them with others; ● There is no obligation of confidentiality
- YMCA of the USA, YMCA, and collaborating third parties will not be liable for any use or disclosure to a third party
- YMCA of the USA and YMCA shall exclusively own all known or later existing rights to the uses worldwide. ● YMCA of the USA and YMCA can use any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account for any purpose and without compensation to me.

Release from Liability. I agree that my consent is irrevocable. I hereby release and discharge YMCA of the USA, YMCA, their related parties and those they have given permission to use the above, from any and all claims, actions, lawsuits or demands of any kind arising out of my consent, the use, or the shared use of the above materials.

Signature: _____

Date: _____

Printed Name: _____

Age: _____

Address:

I am the Mother/Father/Legal Guardian of _____. For the consideration contained herein, I hereby consent to the foregoing on behalf of my minor child.

Signature of Mother/Father/Legal Guardian: _____

Printed name: _____

I have signed and returned the required photo, audio/video, narrative release form.

Release: As a leading nonprofit improving the nation's health, the Y supports all individuals in achieving their health goals. The Y is always striving to learn more about program improvement. To that end, we are requesting your permission to collect enrollment and assessment data. I give my consent for full participation by my child in all activities. I give the YMCA permission to transport my child in the event of an emergency and to seek and use medical help. I accept all risks incidental to activities and do hereby release the YMCA, its officers and its representatives from all liability deriving from pursuits of said activities by my child.

Participation waiver: Participant specifically assumes all risk of injury arising out of my presence on the premises of the YMCA, my use of its equipment or facilities and my participation in its activities, whether on its premises or at another location, and for myself and my heirs and assigns hereby waive and agree to hold free from all claims for damages the YMCA and its officers, directors, members, and employees or agents. I understand the risks and dangers involved in participating in the programs and activities of the YMCA, am physically capable of participating in such programs and agree not to participate in any activity that may injure myself or others.

I authorize and acknowledge that I have read, understand, and agree to the above.

Student

Date