

# Spring Loaded Dive Club

## Training for AAU-Registered Divers

The Fall/Winter 2024-25 Spring Loaded Diving Club provides an opportunity for both male and female **AAU-registered divers** to hone their skills in preparation for the dive season. This program will be available for beginner, intermediate, and advanced-level divers.

In order to provide a higher level of instruction, each session will be limited to fifteen divers.

**Location:**  
**Shenendehowa Aquatic Center**

**Session One - Mondays, Wednesdays  
& Fridays**  
**6:00 - 8:00 pm**  
**Fee: \$550 per diver**

**Session Two - Mondays, Wednesdays  
& Fridays**  
**6:00 - 8:00 pm**  
**Fee: \$550 per diver**

To register, make check payable to:  
Clifton Park Piranhas  
and mail with form  
no later than deadlines shown to the right:

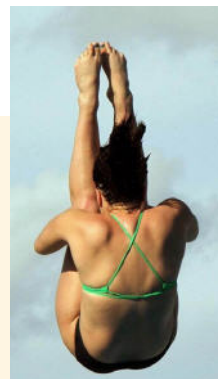
Dennis Hogan  
2012 Barrett Road  
Ballston Spa, NY 12020

NOTE: \*There will be break days in each session.

**Fall/Winter**  
**2024-25 Sessions**  
**Sept. 16 - Nov. 15 &  
Dec. 2 - Feb. 12**

### **Registration Deadlines**

Sept. 14 for Session 1  
Nov. 28 for Session 2



### **Head Coach Dennis Hogan**

has been coaching for more than thirty years and has trained many high school state and collegiate record holders, as well as a two-time national champion.

He has led USA National teams and competed at the USA National Level in the US and abroad. He has received both the NCAA Division 2 College Coach and Mid Atlantic College Coach of the Year awards.

Coach Hogan has coached for Waterford-Halfmoon, Ballston Spa, and Shenendehowa schools, as well as The College of St Rose, where he is a member of the college's Coaching Hall of Fame. Dennis is the Founder of *Adirondack Aerial Assault Pole Vault* and *ATNT Performance*, an athlete training company in Ballston Spa, NY.

For more info, phone: (518) 441-0567

Please complete the following form and submit with your fee:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Email: \_\_\_\_\_  
City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_ AAU Reg. # \_\_\_\_\_  
Emergency Contact Name: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_  
Parent(s)/Guardian(s) Name(s): \_\_\_\_\_  
Parent(s)/Guardian(s) Cell Phone(s): \_\_\_\_\_