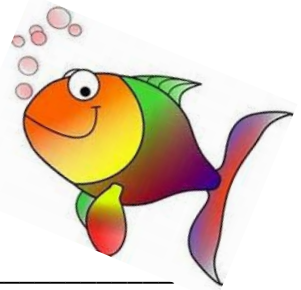


SEBCO POOL

2023 GROUP SWIM LESSON REGISTRATION



Swimmer's Name: _____ Age: _____

Parent's Name: _____ Phone #: _____

Address: _____

Email address: _____

Does the swimmer have any medical condition or special needs the instructor should be aware of: (i.e., diabetes, asthma, seizures, intellectual disability) Yes _____ No _____ If yes, please explain _____

Each session consists of four (4) 60-minute lessons, Monday - Thursday. Make-up lessons will be offered if class needs to be canceled for any reason. PLEASE NOTE: There are NO REFUNDS for missed lessons, no-shows or if your child is not willing to participate once classes start. Parents are not permitted in the pool, or on the pool deck during lessons. If your child is not willing to participate and/or disrupts class, the lifeguard will ask that you remove your child for his/hers, and other swimmer's safety. **Minimum age requirement for swimmers is 3.** Please choose your session below:

- | | | |
|---|---|--|
| <input type="checkbox"/> Session One (June 12 to June 15)
10:45 am - 11:45 am, Mon. – Thurs. | <input type="checkbox"/> Session Two (June 19 to June 22)
10:45 am - 11:45 am, Mon. – Thurs. | <input type="checkbox"/> Session Three (June 26 to June 29)
10:45 am - 11:45 am, Mon. – Thurs. |
| <input type="checkbox"/> Session Four (July 10 to July 13)
10:45 am - 11:45 am, Mon. – Thurs. | <input type="checkbox"/> Session Five (July 17 to July 20)
10:45 am - 11:45 am, Mon. – Thurs. | |

Fridays reserved as rain make-up dates (6/16, 6/23, 6/30, 7/14 & 7/21). Gates open at 10:40 a.m.

- Member \$45/session (Pass # _____) Non-Member \$70/session

Class size is limited and your child's spot in the session is not confirmed until payment and signed registration are received at the pool. First come first served! All payments MUST BE received prior to the first day of the session. Please make checks payable to SEBCO Pool Association. After opening day, registrations MUST be brought to the pool to secure your spot. You will be notified via email of your child's Session and Level # prior to the first day of the session. Swimmers must exit the immediate pool area from 11:45am – 12:00pm when lifeguards are NOT on duty. NO ONE IS PERMITTED IN THE WATER AT THIS TIME!

- My child took swimming lessons at SEBCO last season, or last session. He/She achieved level _____.
 My child has not taken swimming lessons at SEBCO Pool.

Please estimate your child's current skills and abilities by choosing one of these descriptions:

- LEVEL 1** - Child hasn't had any swimming lessons or doesn't exhibit the skills on the next line
- LEVEL 2** - Child opens eyes underwater, submerges mouth & nose, floats on back, glides on front & enters and exits the water independently
- LEVEL 3** - Child exhibits all the skills above as well as: goes under water, treads water, can front float & rollover to a back float and can push off and swims using a combination of arm and leg actions for 15 feet on both front and back. Child needs stroke development
- LEVEL 4** - Child exhibits skills above and can jump into deep water & return to the side, swim front crawl for 15 yards with face in the water, tread water for 30 seconds, and dive in from kneeling position, needs stroke improvement
- LEVEL 5** - Child exhibits all the skills above and can swim front crawl for 25 yards, float on back for one minute, swim elementary backstroke and the breaststroke for 15 yards

Permission:

I understand that SEBCO Pool Association assumes no responsibility for the safety of any users of the pool or equipment or loss or damage to personal property.

Parent/Guardian Signature: _____ Date: _____

Pool office use: Payment date: _____ Cash _____ Check # _____ C.C _____ Level assigned: _____ (level passed _____)