

## STRONG SWIMMERS CONFIDENT KIDS

## **SWIM LESSONS**

The YMCA is San Angelo's community resource when it comes to safety in/around water and swim education. Parents are invited to register their children ranging from 6 months to 12 years of age in our aquatics program. Our aquatics program builds swimmers from the ground up and instills skills they can carry with them for a lifetime. With these skills they will not only lead healthier and happier lives but they will have the knowledge to possibly safe their own life.

Swimming lessons are 30 minutes in length and meet 8 times each session. Evening lessons offered year-round while morning lessons are offered June - August.

Each participant will be taught to their own swimming level regardless of swim time. It is strongly recommended that any young swimmers be tested before registration for our Swim Stroke course.

**SWIM STARTERS: (6 MO. - 3 YRS)** Accompanied by a parent, infants and toddlers learn to be comfortable in the water and develop swim readiness skills through fun and confidence-building experiences, while parents learn about water safety, drowning prevention, and the importance of supervision.

**SWIM BASICS: (3 YRS. – 12 YRS.)** Students learn personal water safety and achieve basic swimming competency by learning two benchmark skills:

- Swim, float, swim-sequencing front glide, roll, back float, roll, front glide, and exit
- Jump, push, turn, grab

**SWIM STROKES (5 YRS. - 12 YRS.):** Having mastered the fundamentals, students learn additional water safety skills and build stroke technique, developing skills that prevent chronic disease, increase social-emotional and cognitive well-being, and foster a lifetime of physical activity.

**COST:** Y-Members: \$30.00 / Y Non-Members: \$45.00

SESSIONS: Tuesday and Thursday evenings for 4 weeks at

5:00pm, 5:30pm, 6:00pm and 6:30pm September 3 - September 26, 2019

October 1 - October 29, 2019 (No class October 24)

October 31 - November 26, 2019







## **AQUATICS PROGRAM REGISTRATION**

Participant Name:			D.O.B	Age:	
Address:					
Cell Phone: ()		Y	MCA Member: YES	NO	
Parent's Name:		Cell Phone:			
		Phone	e Carrier:		
Parent's Email:					
Emergency Contact: (other than Parent)			Phone:		
	conditions that t	the YMCA and ins	structors need to know	about the participant?	
Class you are register Swim Starters S Swim Club Lifeguar Session:	wim Basics d Certification	Swim Stroke			
service fee will be accessed. WAIVER: I hereby, for myself against the San Angelo YMCA nection with my child's partic ance may be used in case of a PHOTO RELEASE: Additionally images, video and film footag conducted by YMCA of San A Council of Young Men's Chris YMCA of San Angelo to make ductions of me and/or my nar motions, advertising and legit	and my agents, waive and it's respective o ipation in this activity an accident.  In in consideration for e is often used by the angelo hereby give my tian Associations of the produce, edit, broad account of my timate business uses to any active account of my timate business uses to any active account of my timate business uses to any active account of my timate business uses to any active account of my timate business uses to any active account of my timate business uses to any active account of my timate business uses to any active account of my timate business uses to any active account of my timate business uses the account of my timate business uses the account of my timate account of the	and release any and a fficers, agents, sponso of the the the the the being allowed to partice of the the the the permission and consecute the United States of An adcast or rebroadcast of experience at YMCA of without any compensation	Ill rights and claims which I may rs or any employees for any ingenthal this program provides linguisted in YMCA membership and for promotional purposes. For int, now and for all time, to YM merica (YMCA of the USA) and the any video film, footage, sound if San Angelo for publication, dition to, and/or claim, by me. I me.	y have, or which may accrue jury which may be suffered in conmitted insurance and my own insurand programs, I understand that my participation in activities to be CA of San Angelo, The National third parties collaborating with track recordings and photo reprosplay, or exhibition thereof in promay, or may not be, identified in products or commercial services.	
Parent/Guardian Signature			Nate		