



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

ROCKLAND COUNTY YMCA GROUP SWIM LESSON REGISTRATION

Register for the Spring 2019 Session

Our 8 Week Session Runs from April 29-June 23

Registration opens April 15th for Members & April 22nd for Non-Members

Swim Starters (Ages 6months-3 years + 1 caregiver):

Infants & toddlers learn to be comfortable in the water & develop swim readiness skills through fun, confidence-building activities

Stage 1 (Preschool/School Age):

Increases comfort with underwater exploration & introduces basic self-rescue skills performed with assistance

Stage 2 (Preschool/School Age):

Encourages forward movement in water & introduces basic self-rescue skills

Stage 3 (Preschool/School Age):

Develops intermediate self rescue skills performed at longer distances than in previous stages

Stage 4 (Preschool/School Age):

Introduces basic stroke technique in front crawl/back crawl & reinforces water safety through treading water & elementary backstroke

Stage 5 (School Age):

Introduces breaststroke & butterfly & reinforces safety through treading water & sidestroke

Stage 6 (School Age):

Refines competitive stroke technique & encourages swimming as a part of a healthy lifestyle

Session Fees:

Family Membership: \$100
Members: \$135
Non-Members: \$205

Mondays- 7 Lessons for Memorial Day

Family Membership: \$88
Members: \$118
Non-Members: \$180



If you have any questions, please contact:

Jessica Keavney, Aquatics Director (845) 643-3052
Brett Ilie, Assistant Aquatics Director (845) 643-3057

 Rockland County YMCA Aquatics

 RC_YMCA_Aquatics

 Rocklandymca.org



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Student Information:

Name: _____

Recommended/Previous Level: _____

Date of Birth: _____

Age: _____

Monday:

- ____ Swim Starters A/B 11:05– 11:35
- ____ Preschool 1&2 (Ages 3-5) 4:00-4:30
- ____ School Age 1&2 (Ages 6-12) 4:30-5:15
- ____ School Age 3&4 (Ages 6-12) 5:15-6:00
- ____ School Age 5&6 (Ages 6-12) 6:00-6:45

Tuesday:

- ____ Preschool 1&2 (Ages 3-5) 4:00-4:30
- ____ School Age 1&2 (Ages 6-12) 4:30-5:15

Wednesday:

- ____ School Age 3&4 (Ages 6-12) 4:00-4:45
- ____ School Age 5&6 (Ages 6-12) 4:45-5:30

Friday:

- ____ Preschool 1&2 (Ages 3-5) 4:00-4:30
- ____ School Age 1&2 (Ages 6-12) 4:30-5:15
- ____ School Age 3&4 (Ages 6-12) 5:15-6:00

Saturday:

- ____ Swim Starters A/B 10:00-10:30
- ____ Preschool 1&2 (Ages 3-5) 10:35-11:05
- ____ Preschool 1&2 (Ages 3-5) 12:10-12:40
- ____ Preschool 3&4 (Ages 3-5) 12:45-1:15
- ____ School Age 1&2 (Ages 6-12) 1:20-2:05
- ____ School Age 3&4 (Ages 6-12) 2:10-2:55
- ____ Adult Intermediate (Ages 13+) 3:00-3:45

Sunday:

- ____ Swim Starters A/B 10:00-10:30
- ____ Preschool 1&2 (Ages 3-5) 10:35-11:05
- ____ Adapted (Ages 2-12) 11:10-11:40
- ____ Preschool 3&4 (Ages 3-5) 12:10-12:40
- ____ School Age 3&4 (Ages 6-12) 12:45-1:30
- ____ School Age 1&2 (Ages 6-12) 1:35-2:20
- ____ Preschool 1&2 (Ages 3-5) 2:25-2:55
- ____ School Age 5&6 (Ages 6-12) 3:00- 3:45

Policies:

Our lessons progress from each lesson so it is important to attend all lessons and be on time. You are allowed 1 make up lesson, but it **must be scheduled with the aquatics department in advance.** Please email JKeavney@rocklandymca.org for makeups.

Permissions:

- ____ I understand a parent or guardian 18 or older must accompany each swimmer and stay in the building for the entire lesson.
- ____ In the event I, or my emergency contacts, am not able to communicate or cannot be reached in an emergency, I hereby give permission to the medical personnel selected by the YMCA to properly treat the participant. I will be fully responsible for any costs of such treatment, even if not covered by insurance.
- ____ The named participant is physically sound, having medical approval to participate in the activities of the YMCA. This information is correct as far as I know, and the person here in described has permission to engage in all prescribed program activities except as noted.
- ____ In consideration of the named participant’s participation in the activities of the Rockland County YMCA, I hereby agree to hold free from any and all liability the YMCA and its respective officers, employees and members. I do hereby for myself, my heirs, executors and administrators, waive, release and forever discharge any and all rights and claims for damages which I may have or which may hereinafter accrue to me arising out of or connected with the named participant’s participation in any of the activities of the YMCA.
- ____ Yes, I give permission for the Y to use my child’s photograph for public relations and/or marketing purposes.

I have read and will abide by the above stated policies and my signature confirms my acceptance.

Signature of Adult: _____

Date: _____

Parent Information (if child under age 18)

Name: _____

Daytime/Cell Phone: _____

Email Address (Please print clearly): _____