



# LITTLE FLOATERS

## YMCA of Bristol Infant & Toddler Survival Swim Program

Little Floaters is a one-to-one survival swim program that teaches children ages 1-4 years old how to roll on their backs so they can breathe, float and reach the side of the pool until help arrives. Those precious seconds can save a life! Sessions include 8 lessons, each 10-15 minutes long. These lessons maximize the short attention span of young children while gradually increasing the child's skill level in the water through individual quidance by a trained instructor.

Ages: 1-4 years old

Classes are held 2 days per week for 4 weeks:

Monday & Wednesday

8:30am, 8:45am, 9:00am, 9:15am

5:00pm, 5:15pm, 5:30pm, 5:45pm, 6:00pm

Tuesday & Thursday

8:30am, 8:45am, 9:00am, 9:15am, 9:30am

5:00pm, 5:15pm, 5:30pm, 5:45, 6:00pm, 6:15pm, 6:30pm, 6:45pm

Additional times may be available upon request

Members: \$210 Potential Members: \$290

Register Now!

Ouestions? Contact Suzanne Wantland (423)968-3133.

### 2020 Winter/Spring Schedule

January 13th - February 6th February 17th - March 12th March 23rd - April 16th

### YMCA of Bristol

400 MLK Jr. Blvd., Bristol, TN 37620 **P** 423 968 3133 **W** bristolymca.net







# Little Floaters Registration Form

| Guardian Full Name:   |                                  |                           |                        |                        |                  | _ DOB:     | /                | /       |  |
|---|----------------------------------|---------------------------|------------------------|------------------------|------------------|------------|------------------|---------|--|
| Street Address:   |                                  |                           |                        |                        |                  |            |                  |         |  |
| City:S  |                                  |                           |                        |                        | e:               | Zip:       |                  |         |  |
| Cell Phone: ()  |                                  | Ema                       | ail:                   |                        |                  |            |                  |         |  |
| Contact preference? (check all that apply) Text   |                                  |                           |                        |                        | Phone Call Email |            |                  |         |  |
| Participant's Name:   |                                  |                           |                        |                        |                  | _ DOB:     | /                | _/      |  |
| Session # Les   | sson Time:                       |                           |                        |                        | _                |            |                  |         |  |
| Shirt Size (circle): 6-   | -9M 12M                          | 18M                       | 2T                     | <b>3</b> T             | <b>4</b> T       | 5T         |                  |         |  |
| Please circle the child's   | s race (for nonp                 | rofit repo                | orting p               | urpose                 | s)               |            |                  |         |  |
| American Indian Alaskan Native  |                                  |                           | African American/Black |                        |                  |            |                  |         |  |
| Asian/Pacific Isla  | ander Hispar                     | Hispanic C                |                        |                        | Caucasian/White  |            |                  | Other   |  |
| Please describe any me  | edical, emotiona                 | al or beha                | vioral c               | onditio                | ns that          | we need t  | o be awa         | are of: |  |
| By signing below, I volu<br>Sessions Water Safety<br>activity, in and around<br>responsibility for injury | Program. I und<br>the YMCA of Bi | erstand tl<br>ristol pool | hat thei<br>and fa     | re are in<br>cility. I | herent<br>accept | risks invo | olved in t<br>II |         |  |
| Guardian Signature:   |                                  |                           |                        | Date:                  |                  |            |                  |         |  |





