



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# SWIM LIKE A FISH!

## Group Swimming Lessons YMCA of Bristol

The YMCA Group Swim Lesson program teaches children to be safe and have fun around the water. We create an environment where all can come together to learn, grow and thrive.

Classes are 30 minutes long, twice a week for four weeks:

**July 7 – July 30, 2020**

### Tuesday/Thursday AM

Parent/Child: 6-36 months (8:30-9:00am)

Preschool: 3-5 years (9:05-9:35am)

School Age: 6-12 years (9:40-10:10am)

### Tuesday/Thursday PM

Parent/Child: 6-36 months (5:00-5:30pm)

Preschool: 3-5 years (5:35-6:05pm)

Preschool/School Age: 3-5 years (6:10-6:40pm)

School Age: 6-12 years (6:45-7:15pm)

**Pricing: Members: \$35    Potential Members: \$70**

**Space is limited!**

Questions? Please contact Suzanne Wantland (423)968-3133.

### YMCA of Bristol

400 MLK Jr. Blvd., Bristol, TN 37620  
P 423 968 3133 W [bristolymca.net](http://bristolymca.net)





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## STAGE DESCRIPTIONS & REGISTRATION

*There is only 1 Stage for the Parent/Child class which will be divided into smaller groups during lessons*

### Preschool Classes (Stages 1, 2 & 3)

### School Age Classes (Stages 1, 2, 3, 4 & 5)

**1 / WATER ACCLIMATION**

Will not put face in the water, or has never had swim lessons

**2 / WATER MOVEMENT**

Will put face in the water Ready to start swimming

**3 / WATER STAMINA**

Can swim to safety from a short distance

**4 / STROKE INTRO**

Ready to learn stroke techniques

**5 / STROKE DEVELOPMENT**

Learn all major competitive strokes.

Questions about stages? Contact Suzanne (423)968-3133.

### Participant Information (Race is for reporting purposes only)

Please Circle the Appropriate Class Level

_____	____/____/____	_____	_____	Session # _____	Stage: _____	Parent/Child	Pre-School	School Age
<b>Program Participant's Full Name</b>	<b>Date of Birth</b>	<b>Age</b>	<b>Race</b>					
_____	____/____/____	_____	_____	Session # _____	Stage: _____	Parent/Child	Pre-School	School Age
<b>Program Participant's Full Name</b>	<b>Date of Birth</b>	<b>Age</b>	<b>Race</b>					
_____	____/____/____	_____	_____	Session # _____	Stage: _____	Parent/Child	Pre-School	School Age
<b>Program Participant's Full Name</b>	<b>Date of Birth</b>	<b>Age</b>	<b>Race</b>					

### Guardian Contact Info

_____	____/____/____	_____		
<b>Name</b>	<b>Date of Birth</b>	<b>Email Address</b>		
_____	_____	_____	_____	_____
<b>Home Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	<b>Cell Number</b>
<b>Contact preference? (check all that apply)</b>	<input type="checkbox"/> Text	<input type="checkbox"/> Phone Call	<input type="checkbox"/> Email	<input type="checkbox"/> Any/No Preference
_____	_____			
<b>Emergency Contact</b>	<b>Phone Number</b>			

Anything we should know about your child(ren)? (allergies, special needs, etc)

### Waiver

I hereby certify that my child is in normal health and capable of safe participation in Y Youth Programs. If there are any health conditions, I will notify the Y of such problems. I assume all risk(s) and hazards incidental to the conduct of any program.

I hereby authorize the Y to obtain medical treatment for my child in the event that parent/guardian(s) cannot be reached. I will be responsible for any medical costs, including ambulance transportation.

I give permission for my child to participate in the media coverage and publicity of the YMCA.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_