

Youth Swim Lessons

Lessons Provided Through the Olympia Country Swimmers Swim Team

**Please note this is NOT an Olympia Unit School District No. 16 Activity*

2019 Spring Session - cost \$50

April 1 –24, 2019; Mondays & Wednesdays
(lessons are both days not either or)

Olympia High School Pool, Stanford, IL

Times to choose from: 6:00 p.m., 6:30 p.m., or 7:00 p.m.

Class Size: Minimum 2: Maximum 5

Age Range: 4 years old and up

LEVEL DESCRIPTIONS

LEVEL 1— This level will be working on safely entering and exit water, blowing bubbles, going under water, floating on back and fronts, and safety skills. *If your child can comfortably and correctly complete all of these skills, please enroll in level 2.*

LEVEL 2— This level will be working on jumping into the water, fully going under water, holding breath, unsupported floating for 5 seconds, kicking with kickboards, swimming on front and back for 5 yards and safety. *If your child can comfortably and correctly complete all of these skills, please enroll in level 3.*

LEVEL 3— This level will be working on headfirst entries from side in sitting & kneeling positions, freestyle across the pool while breathing, backstroke, elementary backstroke, jumping into deep water, and skills for treading water. *If your child can comfortably and correctly complete all of these skills, please enroll in level 4.*

LEVEL 4— This level will be working on head first entries from the side, swimming under water, feet first surface dives, turns, freestyle, backstroke, elementary back stroke, & breaststroke. *If your child can comfortably and correctly complete all of these skills, please consider joining the Olympia Country Swimmers swim team.*

WHAT TO BRING: Swim Suit and towel. Goggles are optional but not required. Goggles will be available for purchase at swim lessons for \$10

TO REGISTER: Complete the registration form on the opposite side in its entirety and mail that with the \$50 registration fee to:

Erin Winters, OCS, P.O. Box 104, Stanford, IL 61774

Please make note that space is limited and slots will fill up fast. Get your registrations in early. You will receive confirmation of your session time via e-mail listed on registration form.

If you know of any other families with children needing swim lessons please forward this information on to them. If you have questions, please contact Erin Winters at esessions@hotmail.com

Olympia Country Swimmers Swim Lesson Registration Form

Child's Name: _____

Address: _____

City/State/Zip: _____

Age/Birthdate: _____

Phone (Home/Cell): _____

Parent Name: _____

Parent Email : _____

(You will receive confirmation of lesson registration through this e-mail address)

Level & Session Time Preference _____

Medical Conditions: _____

I do hereby consign, waive and release any and all rights and claims for damages that may accrue against Olympia Country Swimmers, Inc., Olympia High School, Olympia Unit School District No. 16, or their employees, for any or all injuries suffered by me or by (Child's Name) _____, during any activities associated with the Olympia Country Swim Lessons.

I hereby give my permission for Olympia Country Swimmers personnel to administer emergency first aid treatment and to follow emergency procedure as indicated previously (by parent) for my child(ren), should an emergency arise during OCS activities.
Any child who has had an operation or serious illness since their last annual health exam must secure a written statement from their doctor giving permission to participate in this program.

Parent/Guardian Signature: _____

Date: _____