

Foresthill Swim & Recreation
Mail to: PO Box 302, Foresthill, CA 95631
Swim Registration Form 2010

The pool is open from June 1st through August 15th, 2010

Swim Lessons - Red Cross Learn-to-Swim Program

Our instructors are Water Safety Instructor (WSI) certified and trained, and follow the Red Cross Learn-to-Swim lesson guidelines.

- Level 1: Can be without you, yet cannot put face in water and doesn't want to let go
- Level 2: Can put face in water and can let go sometimes.
- Level 3: Can jump in, submerge and recover.
- Level 4: Knows the front crawl.
- Level 5: Ready to improve strokes.
- Level 6: Ready to define strokes

Session Dates

Weekday Lessons (30 minutes)

Session 1 – June 14th to June 25th

Session 2 – June 28th to July 9th

Session 3 – July 12th to July 23rd

Session 4 – July 26th to August 6th

Session 5 – August 9th to August 20th

Weekend Lessons – Saturday & Sunday

Session A – June 19th & 20th

Session B - June 26th & 27th

Session C – July 17th & 18th

Session D – July 31st & August 1st

Session E – August 7th & 8th

Family Swim Pass – Allows use of pool during all public swim sessions for your entire family.

Individual Swim Pass – Allows use of pool during all public swim sessions for one person.

Swim passes do not include water aerobics, lap swim, pre-teen or teen swim, or water polo.

Exercise Pass – Allows attendance at all lap swim and water aerobics classes.

Swim Team registration includes swim pass for public swim for team members.

Parent / Guardian Names _____

Home Address _____

Mailing Address (if different) _____

Phone # (Day) _____ (Cell) _____ (Evening) _____ email _____

Physician Name _____ Physician Phone # _____

Insurance Carrier _____ Group or Policy # _____

Emergency Contact (other than parent) Name _____

Emergency Contact Address _____ Phone (Day) _____ (Eve) _____

I understand that serious accidents occasionally occur during swimming programs. Knowing the risk and in consideration of being permitted to participate in Foresthill Swim and Recreation Association Programs, I agree to release and discharge in advance the Foresthill Swim and Recreation Association, it's officers, employees and agents from any and all liability for personal injury, death, or property damage connected with participation, even though that liability may arise out of their negligence or carelessness.

Parent / Guardian Signature _____ Date _____

Swim Team Registration - \$90 first swimmer, \$80 additional swimmers

Name _____ (male / female) Date of Birth _____ x \$90 _____
Name _____ (male / female) Date of Birth _____ x \$80 _____
Name _____ (male / female) Date of Birth _____ x \$80 _____
Name _____ (male / female) Date of Birth _____ x \$80 _____

Please Volunteer Deposit \$100 (check is held and returned at end of season) separate check
Check One Volunteer Buy-out \$200 (no volunteer time required) required

Parent Code of Conduct: All parents will be required to read and sign the League Code of Conduct and abide by its rules at all swimming events.

Note: There is a team photo website where swim meet photos are posted after the meets. Children are not identified on the site. Access to the site is password limited. Initial below to indicate that you agree to allow team photographers to upload pictures of your swimmers to the team photo site.

Swim Lesson Registration –

Weekday Lesson Prices: \$60 first swimmer per session, \$50 additional swimmers for same session
Weekend Lesson Prices: \$25 first swimmer per session, \$20 additional swimmers for same session

Name: _____ Age: _____ Session #: _____ Level: _____ am or pm _____
Name: _____ Age: _____ Session #: _____ Level: _____ am or pm _____
Name: _____ Age: _____ Session #: _____ Level: _____ am or pm _____
Name: _____ Age: _____ Session #: _____ Level: _____ am or pm _____

Individual Swim Pass - \$65 each

Name: _____ x \$65 _____
Name: _____
Name: _____

Family Swim Pass - \$140 each

List all family members who will be using this pass

Name: _____ Name: _____
Name: _____ Name: _____
Name: _____ Name: _____
Name: _____ Name: _____

Exercise Pass - \$60 each

Name: _____ x \$60 _____
Name: _____
Name: _____

Scholarship Fund Donation – Would you like to contribute \$5 towards the swim team scholarship fund to help offset registration costs for swimmers in need of assistance? _____

Please indicate any known medical concerns for any swimmers listed on this form

Total: _____

Please make checks payable to **Foresthill Swim and Recreation**

Office use:

Date Rec'd _____ Treas. Init. _____

Computer Input Date _____ By Whom _____