YMCA Swim Lessons Grant Participant Enrollment Form

Child's first name:	Child's last name:		
Child's gender: ☐ Male ☐ Female ☐ Other_	Child's DOB (mm/do	Child's DOB (mm/dd/yyyy): / /	
Name of parent/guardian:	Phone Number:	Phone Number:	
Address:	City:	Zip code:	
Email (REQUIRED!!!!!)			
Can your child jump into the water and safe	ely exit the pool on his or her ov	vn? □ Yes □ No	
Has your child ever had a swim lesson before	re?		
Do you need financial for YMCA Swimming I	Lessons? Yes No		
Is your child new to the Y (i.e., has never p	articipated in a Y program before	re)? □ Yes □ No	
☐ I do not wish to self-identify ☐ White ☐ Black or African American	 □ Native Hawaiian or Other Pacific Islander □ Some other race □ Two or more races □ Hispanic/Latino 		
How did you hear about this program?			
☐ Mailing/email communication ☐ Poster/flyer/Y event	 □ Media (TV, Web, radio, print, etc □ School □ Community-based organization □ Other, please specify 		
$\hfill\Box$ By checking this box, I am authorizing the Y to use ph	noto and video/audio recording for prome	otional use only.	
$\hfill \square$ By checking this box, I understand that any medical e YMCA program are my responsibility. I understand that the false information given by a parent or guardian.			
The Y is always striving to learn more about program impassessment data from your child's instructor.	provement. To that end, we are requesti	ng your permission to collect enrollment and	
I authorize and acknowledge that I have read, une	derstand, and agree to the above.		
Participant name (print)	_		
Parent/guardian signature Check the box - Verbal Confirmation	Date from parent to participate in les	ssons.	
Emergency contact	Phone number		



	YMCA Name:	
Lesson Location:		

These classes will fill up. If you have qualified for the Swim Grant, to confirm your class time you can either speak with front desk staff when you turn in this form, or contact Stella Anderson at 507-532-9622 or email at sanderson@marshallareaymca.org.

What swim level should the individual be signed up for:

(Reminder: Preschool = ages 3-5 years old with levels 1-4, Youth = ages 6-14 years old with levels 1-6)

What swimming lesson time would work best for you:

(Please number the top three class times that work best for you from first choice to last ("1", "2", "3"))

Monday Evening (June 16th – August 4th):

Group Lessons 1 (June 16th-June 26th, MONDAY – THURSDAY MORNING):

Group Lessons 2 (July 7th- July 17th, MONDAY – THURSDAY MORNING):

Group Lessons 3 (July 21st-July 31st, MONDAY – THURSDAY MORNING):

LEVEL 1 - WATER ACCLIMATION

(CAMP SWIM IS ONLY FOR 5 DAY OPTION)

This stage lays the foundation that allows for a student's future progress in swimming

LEVEL 2 - WATER MOVEMENT

Focus on body position and control, directional change and forward movement.

Camp Swim Lessons (FOR SUMMER CAMP KIDS ONLY): _____

LEVEL 3 - WATER STAMINA

Students learn how to swim to safety from a longer distance than

in previous stages in the event of falling into a body of water.

LEVEL 4 - STROKE INTRODUCTION

Develop stroke technique in front crawl and back crawl and learn the breaststroke kick and butterfly kick.

LEVEL 5 - STROKE DEVELOPMENT

Introduces breaststroke and butterfly and reinforces water safety through side stroke and treading water

LEVEL 6 - STROKE MECHANICS

Refines stroke technique on all major competitive strokes and encourages swimming as a healthy lifestyle