

Welcome to the American Red Cross "Learn to Swim Program." For the 2019 Swimming Season, I will be the Red Cross Director and am looking forward to a wonderful summer of swimming excitement. Before we know it school will be ending and summer will be upon us! Therefore, it is time to plan swimming lessons for your child(ren). This summer, there will be an enthusiastic staff, who are ready to teach children of all ages and abilities how to swim and perfect their swimming abilities.

For proper registration, please return the second page of this form to your school no later than May 15, 2019. The schedule for this summer appears below. Note that this schedule pertains to Levels 2-6 classes only. Other courses include the schedule in the course description.

Session A will be held weekdays from June 10-21, from 9:00-10:00 am and 10:00-11:00 am.

Session B will be held weekdays from June 24-July 5, from 9:00-10:00 am and 10:00-11:00 am.

Session C will be held weekdays from July 8-19, from 9:00-10:00 am and 10:00-11:00 am.

Below are the Red Cross Program Requirements for each level. Please notice the requirements for each level and place your child accordingly.

Level II - Fundamental Aquatic Skills

* Enter/Exit Water	*Front/Back Float/Glide
*Fully submerge & hold breath/bobbing	*Treading Water is introduced

Level III – Stroke Development

* Rotary Breathing * Introduce Diving Skills
* Introduce Front Crawl & Elem Backstroke * Child must be able to front/back float well

Level IV – Stroke Improvement

- * Increase endurance for Front and Back Crawl,
- * Introduce Butterfly, Sidestroke, and Breaststroke
- * Survival Swimming/ underwater swimming

Level V – Stroke Refinement

- * Refine performance of all strokes: Front Crawl, Back Crawl, Butterfly, Breaststroke, Elementary Backstroke, and Sidestroke
- * Learn Flip Turns, sculling, surface dives

Level VI – Swimming and Skill Proficiency

- * Students learn to swim with more ease, efficiency, power and smoothness over greater distances
- * Introduce Personal Water Safety, Fundamentals of Diving, Fitness Swimming. (Must choose one).

**These classes will also be offered on the specified dates:

All class lists will be printed in the Fayette County UNION at least one week prior to the start of each session and any changes in the schedule will also be posted there. You can also check out the Park and Rec Website for class listings, <u>www.WUParkandRec.com</u>

FEES: Each class will cost \$25 unless otherwise stated. Checks should be made out to the **West Union Aquatic Center** and payment should be sent with the attached form for each child in a **sealed envelope**. A **\$10 late fee will be assessed on registrations received after May 15, 2019**. There are no refunds.

CANCELLATIONS: Swimming lessons may be cancelled due to severe weather, extreme cold, or pool maintenance difficulties. Cancellations will also be posted on the Park and Recreation Website, <u>www.WUParkandRec.com</u>. You can also sign up for Remind. An invitation will be sent to you once registrations for lessons have been completed. You will need to sign up for the new group and you will receive a text message on your phone when lessons are cancelled. If unsure whether lessons are cancelled, please call the pool before coming at (563)422-5571.

OBSERVATIONS: You are welcome to watch your child on the FIRST AND LAST days of the sessions only. Please honor this request; your presence often distracts the swimmers. Please also stay outside the fence when watching your child(ren).

PLEASE COMPLETE THE ATTACHED FORM AND RETURN IT, ALONG WITH PAYMENT, TO YOUR CHILD'S SCHOOL BY MAY 15, 2019. IT CAN ALSO BE MAILED TO WEST UNION PARK AND RECREATION, PO BOX 151, WEST UNION, IA 52175.

Daycare People: We are requesting that you submit your registration forms to the coordinator of your daycare. The coordinator should submit all registrations for her group together to aid us in keeping all children at their respective daycares together. This will help the daycare providers from making several trips to the aquatic center and keep children from being 'lost'.

I am anticipating a wonderful summer and am looking forward to seeing you and your child!

Molly Wenthold and Kathleen Guyer 2019 American Red Cross Swim Lesson Coordinators

Please note: Due to lack of instructors, we will not be holding the Parent/Child and Preschool Aquatics this summer.

Please use a separate from for each child when registering your children.

To ensure proper registration of your child, please return this form along with the payment to your child's school by May 15, 2019. After that date, please mail the form directly to the West Union Park and Recreation Office, PO Box 151, West Union IA 52175 and include the \$10 late fee. If you have any questions, please contact Molly at cell phone (563)380-0094.

Please complete the following information in its entirety with ONE child per form. Feel free to copy this form, pick up extra forms at West Union City Hall, or print forms from our website at www.WUParkandRec.com. Please choose a first choice and a second choice session for your child to be in. Circle one from each category.

CHILD'S NAME	AGE	
STREET ADDRESS		
TOWN	STATE	ZIP
PHONE	PARENT'S NAME	
PARENTAL SIGNATURE (if under 18	3)	
Please indicate the session, time, and	level you would like your c	hild enrolled in.
First Preference:		
Session: Time:	Level of Lesson	n:
Second Preference: Session: Time:	Level of Lesson	n:
Please include which option for Level		
Personal Water Safety Di	iving Fitness Swimm	ing
Please include DayCare Provider here	e:	

*In the best interest of your child(ren), classes will be held at 15 students per class. You will be notified if I am not able to meet your first preference. Class will not be held if only one student is registered. The student will be moved to a different time slot.

Waiver form: Program registrants assume full responsibility for any risk, implicit or direct, by participation in said activity or facility.

I, parent/guardian of the entrant listed above, waive and release any and all rights and claims for damages against the program listed above, its coaches, the City of West Union and its Parks and Rec. Department/Board and its employees, other sponsors, coaches and volunteers, for any and all injuries that may be suffered by the entrant listed above in connection with the above registered activity.

Parent/Guardian Name (print):______

Signature:_____

Please return this form with payment to: West Union Park and Recreation by May 15, 2019.