



SWIM LESSON REGISTRATION

March 2010

Parent-Tot
6mo-36mo

- 10:30am - 11:00am SKIPS (SAT)
- 11:00am - 11:30am SKIPS (M/W)

Preschool
3-5 years

- 9:00am - 9:30am Eel (SAT)
- 9:00am - 9:30am Starfish (SAT)
- 9:45am - 10:15am Pike (SAT)
- 9:45am - 10:15am Ray (SAT)
- 10:30am - 11:00am Eel (SAT)
- 11:00am - 11:30am Eel (M/W)
- 11:45am - 12:15pm Pike (M/W)
- 11:45am - 12:15pm Ray (M/W)
- 12:30pm - 1:00pm Eel (M/W)
- 12:30pm - 1:00pm Starfish (M/W)

Youth
6-12 years

- 9:00am - 9:30am Polliwog (SAT)
- 9:45am - 10:15am Guppy (SAT)
- 10:30am - 11:00am Minnow (SAT)

Adult
13+ years

- NONE WILL BE OFFERED THIS MONTH
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- Saturday Session March 6-27, 2010
- Mon/Wed Session I March 8-17, 2010
- Mon/Wed Session II March 22-31, 2010

Southern Arizona YMCA
NW YMCA Pima County Community Center
7770 N Shannon Rd
Tucson, AZ 85741
www.tucsonymca.org

Aquatics Director:
Barbara McFarlin
Phone (Facility): 229-9001
Phone (Pool): 229-9006
nwaquatics@tucsonymca.org
barbm@tucsonymca.org

Registration begins

Saturday February 13, 2010
Facility members beginning 9:00 am
Program members beginning 12 noon
**Registration Deadline: 3 days
before the start of the first class.**

No refunds/cancellations after close of registration.

ENROLLMENT INFORMATION:

Program member:
\$37.00 per session (4 lessons)

Facility member:
\$24.00 per session (4 lessons)

“Y” Program Membership fee:
\$15.00 annually plus session fees.

Aquatic cashiers will be available to take your registration during the following hours:

Mon-Fri 5:30am - 1pm & 4pm - 8pm
Saturday 9am - 5pm
Sunday 10am - 5pm

Class: _____ Days: _____ Time: _____ Session Dates: _____

Name of Participant _____ M _____ F Birthdate _____

Age _____ Years of experience _____ Name of previous swim class _____

Parent/Guardian _____ Homephone _____ Work _____ Mobile _____

Pager _____ Address _____ ZipCode _____

In case of emergency notify _____ Emergency contact phone _____

I hereby certify that _____ is of normal health and is capable of participating in this activity. I understand that the children will be under direct supervision at all times and that I will not hold the YMCA responsible for accidents.

Signature _____ **Date** _____

Amount paid _____ Check# _____

Cash / Check / VS / MC / AX Credit card # _____ Exp. Date _____

PLEASE NOTE: We cannot register a participant for lessons without payment