



# SWIM LESSON REGISTRATION: Parent-Tot 6mo-36mo

## June 2010

**Saturdays**

- 10:45am - 11:15am
- 12:15pm - 12:45pm

**Session I  
Monday-  
Thursday  
(3 weeks)**

- 10:30am - 11:00am
- 12:00pm - 12:30pm

**Session II  
Monday-  
Thursday  
(2 weeks)**

- 10:30am - 11:00am
- 12:00pm - 12:30pm
- 5:15pm - 5:45pm

**Registration begins**  
Saturday May 15, 2010  
Facility members beginning 9:00 am  
Program members beginning 12:00 pm  
**Registration Deadline: 3 days  
before the start of the first class.**  
No refunds/cancellations after close of  
registration.

**ENROLLMENT INFORMATION:**

**Facility member:**  
\$24.00 per session (4 lessons)  
\$40.00 per session (8 lessons)  
\$55.00 per session (11 lessons)

**Program member:**  
\$37.00 per session (4 lessons)  
\$55.00 per session (8 lessons)  
\$75.00 per session (11 lessons)

**“Y” Program Membership fee:**  
\$20.00 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

- Saturday Session June 5th - June 26th
- Session I Mon-Thurs June 1st - June 17th  
(3 week session 11 lessons)
- Session II Mon-Thurs June 21st - July 1st  
(2 week session 8 lessons)

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

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

Class: \_\_\_\_\_ Days: \_\_\_\_\_ Time: \_\_\_\_\_ Session Dates: \_\_\_\_\_

Name of Participant \_\_\_\_\_ M/F \_\_\_\_\_ DOB \_\_\_\_\_ 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** \_\_\_\_\_

Cash / Check / VS / MC / AX

Amount paid \_\_\_\_\_ Check# \_\_\_\_\_

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