

**ARDSLEY MIDDLE SCHOOL POOL AFTER SCHOOL SWIM PROGRAM
SESSION 1 (2019)
MONDAY CLASSES- FEBRUARY 11th TO APRIL 8th (NO CLASSES 2/18)**

BEGINNER (AGES 4-5) - MONDAY (This class is limited to 10 Students)

An introduction to swimming techniques and water games that help children develop a level of confidence and comfort in the water. Basic skills such as floating, breathing, kicking and arm strokes are introduced and developed.

MONDAY	3:45 PM to 4:30 PM	FEE: Ardsley School District Resident	\$178.00 –	Additional Sibling \$168.00
		Non School District Resident	\$286.00 –	Additional Sibling \$280.00

BEGINNER (AGES 6 & UP) – MONDAY (This class is limited to 10 Students)

This class involves review and refinement of basic stroke and breathing skills. The focus is on coordinating survival skills.

MONDAY	3:45 PM to 4:30 PM	FEE: Ardsley School District Resident	\$178.00 –	Additional Sibling \$168.00
		Non School District Resident	\$286.00 –	Additional Sibling \$280.00

INTERMEDIATE (AGES 4-5) – MONDAY (This class is limited to 12 Students)

Students work on advanced skills such as front and back crawl, deep water treading, survival float and diving. Student should be able to swim a full lap or 25 yards freestyle and backstroke.

MONDAY	4:30 PM to 5:15 PM	FEE: Ardsley School District Resident	\$178.00 –	Additional Sibling \$168.00
		Non School District Resident	\$286.00 –	Additional Sibling \$280.00

INTERMEDIATE (AGES 6 & UP) – MONDAY (This class is limited to 14 Students)

Students work on advanced skills such as front and back crawl, deep water treading, survival float and diving. Student should be able to swim a full lap or 25 yards freestyle and backstroke

MONDAY	4:30 PM to 5:15 PM	FEE: Ardsley School District Resident	\$178.00 –	Additional Sibling \$168.00
		Non School District Resident	\$286.00 –	Additional Sibling \$280.00

Make checks payable to Ardsley UFSD and mail to Pool Recreation Dept., Ardsley UFSD, 500 Farm Rd., Ardsley, NY 10502
NOTE: A non-refundable \$35.00 registration fee is included in all instructional rates. Students will not be permitted to participate in the program until payment has been received. No refunds will be issued after the first class. Return form no later than February 9, 2019. You can register now for Session I and/or Session II. SIGN AND RETURN WAIVER ON PAGE 2.

CHILD'S NAME _____ DATE OF BIRTH _____ PHONE # _____

ADDRESS _____ E-MAIL _____ (print clearly)

CIRCLE ONE → BEGINNER AGES 4-5 MONDAY
 BEGINNER AGES 6 & UP MONDAY
 INTERMEDIATE AGES 4-5 MONDAY
 INTERMEDIATE AGES 6 & UP MONDAY

AMOUNT ENCLOSED \$ _____ SESSION # _____ CHECK NO. _____

WAIVER

I have read and understand the pool regulations listed on the **After School Swim Program Registration form**. I and the children of my family agree to follow them. I (we) also agree to follow the rules posed at the pool and any special instructions given to me (us) by the lifeguards. I (we) hereby agree to assume all risks and hazards incidental to such participation. I and the members of my family also hereby waive, release, absolve, indemnify and agree to hold harmless the Ardsley Union Free School District, any sponsors, supervisors, participants, and employees, from and against any and all claims and/or causes of action arising out of any injury from such participation.

Signed _____ **Date** _____

Print Name _____