#### Kona Kai Swim School Swim Lesson Registration Form

### Swim Lessons 2014

Summer swim lessons at Kona Kai Swim & Racquet Club are scheduled Monday through Fridays from June 11 through August 1, 2012 for ages 4 years and up.

These 30 minute group lessons are designed to help children become acclimated to the water, learn water safety, and develop a proficiency of skills for swim strokes, turns, and diving.

The swim lesson program is a progressive swim skill instructional program for beginners through competitive swimmers. Use the following course descriptions for determining proper level placement.

#### New swimmer (NEW) Ages (4 & Up)

(3-5 swimmers/class)

This level is the introduction to the swim pool environment and to develop a basis for safety and swimming skills. Skills taught include: full face-in the water, full head submersion, bobbing/rhythmic breathing, kicking on front and back, supported front and back floating, kicking, and arm action.

Beginning (BEG) Ages (4 & Up)

(3-5 swimmers/class)

This level is the reinforcement of the new swimmer skills plus the skills of front and back streamlined body position, glides without and with kicking, dog paddle, technical skill elements of freestyle and backstroke.

Intermediate (INT)

Ages (5 & Up)

(4-6 swimmers/class)

This level seeks to continue developing confidence and competency in safety and stroke skills. Skills include: deep water bobbing, treading water, introduction to breaststroke, and open turns.

Advanced (ADV) Ages (6 & Up)

(6-8 swimmers/class)

This level further continues to develop the technical skills of freestyle, backstroke, and breaststroke. Skills include: introduction to butterfly, open and flip turns, and race starts.

#### Lesson Schedule

Session 1	Session 2	Session 3	Session 4
(June 16-June 27)	( <del>June 30-Jul</del> y 11)	( <del>July 14-25)</del>	(July 28-August 8)
*10 lessons	*9 lessons	*10 lessons	*10 lessons

\*Lesson time priority will be given for designated ability groups; other ability groups can be scheduled if instructor & space available

9:00- 9:30	Advanced
9:30-10:00	Advanced
10:00-10:30	Intermediate
10:30-11:00	Intermediate
11:00-11:30	New & Beginning
11:30-12:00	New & Beginning
12:00-12:30	New & Beginning/Private
12:30-1:00	New & Reginning/Private

#### Fees Structure

Group swim lesson (10 x 30 minutes)	Exception:
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Member \$75.00 \*Session 2: due to Friday, July 4th Member \$67.50 Non-member \$85.00 (9 lessons) Non-members \$76.50

Semi-private swim lesson (1 x 30 minutes)

Members \$ 17.50 Non-members \$ 20.00

Private swim lesson (1 x 30 minutes) Stroke Technique Lesson (1 x 30 minutes)

 Member
 \$ 25.00
 Member
 \$ 25.00

 Non-member
 \$ 30.00
 Non-member
 \$ 30.00

Swim School operating days/hours: Monday through Friday: 9:00 to 1:00 P.M.

# Kona Kai Swim School Swim Lesson Registration Form

## Complete the registration/release form and bring it along with your check on the first day of swim lessons:

*Please	e write cl	hecks pay	able to:	"Jim Mal	lley"					
Step 1 NEW		Child's L								
NEW	DEG	INT	ADV							
Step 2	: Circle S	Session N	Number(s	s):						
Session		1		6-June 27						
Session	n	2	June 3	0-July 11	*nine s	wim less	son sessi	on-no les	sons Thu	ursday, 7/4/2013
Session	n	3	July 14	4-July 25						
Session	n	4	July 28	8-August	8					
Stop 3	· Cirolo l	Lesson S	tart Tim	0(c).						
1 <sup>st</sup> Cho	ice.	9:00	9:30	10:00	10:30	11:00	11:30	12:00	12:30	
2 <sup>nd</sup> Cho		9:00	9:30	10:00	10:30	11:00	11:30	12:00	12:30	
3 <sup>rd</sup> Cho		9:00	9:30	10:00	10:30	11:00	11:30	12:00	12:30	
Swimn	ner's Inf	<u>formatio</u>	<u>n</u> :							Member:
						A	Age:		-	
First N	ame		Last N	ame						Non-Member:
D	( ) NT	( )								
Parent(	(s) Name	e(S)								
Addres	SS									
City			State	Zip	Code					
 Daytin	ne Phone	:		Evenin	g Phone					
E-Mail	Address	 S								
					<u>Relea</u>	se Forn	<u>n</u>			
Please	read and	sign the	following	g stateme	nt, so tha	we may	process	your regis	stration.	Thank you.
A grad	amont (	and Ral	aasa fr	om Lial	sility					
						ce of Ko	na Kai Si	wim & R	acquet C	lub and/or Jim Malley, I hereby agree to
										d employees, and Board Members and/or Jim
										arising out of or in any way connected with
										in connection with any activity, I authorize
any per	rson in cl	harge of t	he activit	ty to cons	ent to em	ergency	transport	ation, me	dical and	d/or dental treatment for me or my child, at
										ry any insurance to cover medical and/or
						xpenses	incurred	by Kona	Kai Swir	m and Racquet Club due to my or my child's
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				ign a Koı						ka faran laran laran Gardan in ana ilalah
				of swim		serve sw	iiii iessoi	is iroili o	utsiae ti	he fenced pool area. Seating is available
								Date		
Partici	pant Nan	ne						Date		
Signati	ire (Pare	nt/Guard	ian Siona	ture if un	der 18)		_			
•										
Pleas	e indicat	te any m	edical co	nditions,	allergies	to medi	cations, ]	physical	limitatio	ons and medications being taken: