



Hershey Aquatic Club Developmental Swim Program Summer 2018

www.teamunify.com/mahac

Please be aware that participation in the Developmental Swim Program does not guarantee admittance into the Hershey Aquatic Club competitive swim program.

Purpose - To teach the fundamental drills of the four competitive strokes - Freestyle, Backstroke, Breaststroke, and Butterfly. **THIS IS NOT A LEARN TO SWIM PROGRAM.**

General Class Information

- Instruction is age appropriate, incorporating a low student to instructor ratio.
- Swimmers will learn the fundamentals of Freestyle and Backstroke and progress into the fundamentals of Breaststroke and Butterfly.
- Each swimmer will receive a written evaluation form at the completion of the program.
- Classes will be at the Hershey Recreation Center, 605 Cocoa Ave, Hershey, PA 17033.
- There is one (1) Session scheduled for this Summer. The Session is for four (4) weeks/ four (4) days a week. **There is a non-refundable, \$50.00 registration fee, which is included in the cost of the Session.**

Prerequisites

- Swimmers must be between the ages of 5 and 11 as of the first day of class.
- Swimmers 10 years and older must be able to swim two continuous lengths of the pool - one on their front and one on their back; all others must complete one length, unassisted.
- The above skills will be assessed the first day of class. **If the Swimmer does not pass the assessment, then he/she will be removed from the program and given a full refund, less the \$50.00 registration fee.**

Instructors

- All instructors have an extensive background in beginner and advanced level swim instruction, and competitive swimming.

Summer Session:

June 18 - July 19 (there will be no classes held on July 2, 3, 4, or 5) (4 weeks)

11:00 AM – 11:45 AM, Monday – Thursday (for a total of 16 classes)

Outside Pool at the Hershey Recreational Center

\$350 per child

Cancellation/Refund Policy

If you withdraw your swimmer on or before to **June 8** (which is ten (10) day prior to the start of the program), you will receive a full refund. If you withdraw your swimmer after **June 8** (which is less than ten (10) days prior to the start of the program) you will receive a 50% refund. **There will be no refunds after the first day of the session. In either situation, there will be no refund of the \$50.00 registration fee.**

Program size is limited 20 swimmers and will be filled on a first come basis.

For more information contact the HAC Registrar: Nicole Paul pascdu@yahoo.com

Hershey Aquatic Club Developmental Swim Program Registration Form

Return this form to: Hershey Aquatic Club/Developmental Swim Program
P.O. Box 217
Hershey, PA 17033

Registration is only complete upon return of this form, along with payment in full, to the address above. Please make your check payable to: Hershey Aquatic Club

Price includes a \$50.00 non-refundable registration fee.

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\$350 per child (includes non-refundable registration fee)

How did you hear about the Hershey Aquatic Club Developmental Swim Program?

☐ Current Team Member ☐ Team Website ☐ Elementary School Flyer ☐ Other (where?): _____

Swimmer's Information:

Full Name: _____ Preferred Name: _____ Age: _____

Date of Birth: ____/____/____ Gender: M / F School District: _____ Current grade: _____

Swimming Experience:

____ American Red Cross: Last Level Completed: _____ Private Lessons: Instructor's Name (optional): _____

____ Developmental Swim Class: Session Last Attended: _____

Parent/Guardian Information:

Last Name: _____ Mother: _____ Father: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Email Address: _____

Emergency Contact:

Name: _____ Phone: _____

Permission Statement and Waiver of Liability (please read and sign):

This is to confirm that the above-named candidate has my permission to participate in the Hershey Aquatic Club (HAC) Developmental Swim Program. It is understood that HAC does not provide hospitalization and medical insurance and is not legally responsible for an injury to any participant in the HAC program.

Please check the appropriate information below:

- ☐ The above-named child is covered under our family hospitalization and medical insurance.
- ☐ We have no hospitalization and medical insurance to cover our child. It is understood that the Hershey Aquatic Club is not legally responsible for an injury to a participant of its program and provides no hospitalization and medical insurance. Therefore, in the absence of family coverage, the parent/guardian must assume the responsibility in case of injury. I hereby relieve the Club and its coaches/staff from responsibilities in case an injury might occur.

I give permission for the above-named participant to be treated in my absence for any emergency.

Further, I hereby waive any claim for bodily injury or property damage against the Township of Derry or the Hershey Recreational Center, their agents, servants, and/or employees while the above-named candidate is a participant in the above-named activity.

Parent/Guardian Signature

Date