



## SWIM LESSONS

### Star Babies/Star Tots (6 months—36 months)

First time for parent and toddler swimming together. Learning focuses on trust and comfort and feeling relaxed and comfortable in various body positions in the water.

### Starfish Swim School

3-5 years old, 4 swimmers per class

6 and older, 5 swimmers per class

#### White Level

- Very afraid of water.
- Can't swim at all.
- Will not get face wet.

#### Red Level

- Can't swim without support but loves the water.
- Will get face wet.
- Will jump in the water without hesitation.

#### Yellow Level

- Not afraid of the water.
- Can float on front and back without support.
- Can jump in the water and return to the surface on their own.

#### Blue Level

- Can swim under water or on the surface without support.
- Can come up for a breath while swimming without support.

#### Green Level

- Can tread water for 15 seconds without support.
- Can swim freestyle with rotary (side) breathing.



All swimmers must purchase a personal record book ready for the instructor at every lesson. Record Books are \$1.00 and can be purchased at Acord Ice Center or Centennial Pool.

**Please review the Lesson Levels before registering.**

No refunds, make up or credits for missed classes.

**SPACE IS LIMITED. REGISTER EARLY!**

**Registration begins Monday, May 1, 2017**

Register ONLINE at [www.slco.org/centennial-pool](http://www.slco.org/centennial-pool)  
or during business hours at the Acord Ice Center 385-468-1965.

We reserve the right to combine classes of different levels, and/or change class times to achieve the minimum class size.



For inclusion opportunities for people with disabilities, contact Ashley at 385-468-1520 or [abowen@slco.org](mailto:abowen@slco.org).



Find us on  
**Facebook**

SWIM LESSON SESSIONS							
Check Box	Session	Days		Class Dates	#	Cost	Registration Opens
	Session 1	Mon., Wed.	AM	June 5, 7, 12, 14, 19, 21	6	\$25.50	May 1
	Session 1	Tues., Thurs.	AM	June 6, 8, 13, 15, 20, 22	6	\$25.50	May 1
	Session 1	Saturday	AM	June 3, 10, 24	3	\$12.75	May 1
	Session 2	Mon., Wed.	AM	June 26, 28, July 3, 5, 10, 12	6	\$25.50	June 3
	Session 2	Tues., Thurs.	AM	June 27, 29, July 6, 11, 13	5	\$21.25	June 3
	Session 2	Saturday	AM	July 1, 8, 15	3	\$12.75	June 3
	Session 3	Mon., Wed.	AM	July 17, 19, 24, 26, 31, Aug.2	6	\$25.50	June 26
	Session 3	Tues., Thurs.	AM	July 18, 20, 25, 27, Aug.1, 3	6	\$25.50	June 26
	Session 3	Saturday	AM	July 22, 29, August 5	3	12.75	June 26

SWIM LESSON TIMES AND LEVELS (Circle Class and Lesson Time)							
LESSON LEVELS	White Red	Yellow Blue	Green	White Red	Yellow Blue	Green	Babies Tots
AGES	3-5 yrs	3-5 yrs	3-5 yrs	6 and older	6 and older	6 and older	6-36 mths.
9:55-10:25 am	X	X		X	X	X	
10:35-11:05 am	X	X	X	X	X		
11:15-11:45 am	X	X		X	X		X

Name of Participant \_\_\_\_\_ Gender \_\_\_\_\_

Birthday \_\_\_\_\_ Age \_\_\_\_ Parent's Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Home Phone \_\_\_\_\_ Work \_\_\_\_\_

In Emergency Notify (other than parent / guardian) \_\_\_\_\_ Phone \_\_\_\_\_

**Parental Statement of Agreement – Assumption of Risk, Liability Release and Refund Policy**

Release: I hereby recognize and acknowledge that my child's participation in recreational activities may involve bodily injury and/or emotional injury to myself and/or my child. In consideration of my child being permitted to participate in such events, I for myself, my child, my heirs, my executors and administrators, hereby voluntarily and knowingly release, waive, and discharge Salt Lake County, its officers and employees from any and all liability except that caused solely by the negligence of Salt Lake County, that may result from my child's participation in Parks & Recreation activities. In addition, I agree that I or my insurance company will pay for medical, hospitalization or any other expenses resulting from my child's participation.

Refund: As per Salt Lake County policy and procedures, the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. All refunds must be requested in person, accompanied with a written refund request. No refunds shall be given after the first day of the program.

Collections: I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred to the Salt Lake County Attorney's Office for collection. I understand that any account delinquent 30 days or more will be turned over to the Salt Lake Attorney for collection.

Emergency Treatment: I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise there from. I understand that I or my insurance company will be billed for such emergency treatment.

Equal Opportunity: Salt Lake County Parks and Recreation provides equal opportunity to participate regardless of race, creed, gender, or ability to pay, and will upon request, provide reasonable accommodations to individuals with disabilities.

By signing this assumption of risk, liability release, and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure, and that I agree to its terms.

Signature (Parent or Legal Guardian): \_\_\_\_\_ Date \_\_\_\_\_

<b>OFFICE USE ONLY Receipt #:</b>	<b>Amt.:</b>	<b>Date:</b>	<b>By:</b>
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