**Just Keep Swimming Fall 2019 – Swim Skills – Registration Form**

**Erin Wamsteeker**

* Swim skills programming is intended for children 5-14 years old.
* Swim skills beginner OR
* Swim skills intermediate
* Children work 1:2 with an aide under Erin’s direction in a small group setting
* **Kids will be grouped by best match for age and ability**.

I, (name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (relation to child) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ wish to register the following child/adolescent for swim programming:

Child/Adolescent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child/Adol Mailing address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Contact Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Contact Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent Contact Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents (Names): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child/Adol’s DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child/Adol’s Sex (M/F): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Diagnosis: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your/Your Child/Adolescent’s Goals for Swim Programming: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments on your child’s current swim level and any other matters that Erin should be aware of:

**REGISTRATION**: To secure registration, please fill out registration form and e-mail to justkeepswimmingcalgary@gmail.com

**ONCE REGISTRATION IS CONFIRMED**, you are committed to the program. Fees can be paid through:

* e-transfer to justkeepswimmingcalgary@gmail.com,
* cash,
* or check made out to Just Keep Swimming Calgary

**NOTE:** Children/adolescents NEW to lessons will require a ½ hour assessment ($50). Please call Chelsea at 852-8125 to book.

**Sunday Afternoons at the Crowfoot YMCA:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Check to **Register**  | Semester | Time | Duration | Specific Dates | Cost |
|  | **Fall 2019****Sunday Afternoons** | Please indicate preferred time and we will try our best to accommodate* 3:00-3:30 pm
* 3:30-4:00 pm
 | 12 Weeks | September 8/15/22/29October 6/20/27November 3/17/24December 1/8 | $480 |

**Monday Evenings at the Crowfoot YMCA:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Check to **Register**  | Semester | Time | Duration | Specific Dates | Cost |
|  | **Fall 2019****Monday Evenings** | Please indicate preferred time and we will try our best to accommodate* 6:00-6:30 pm
* 6:30-7:00 pm
 | 12 Weeks | September 9/16/23/30October 7/21/28November 4/18/25December 2/9 | $480 |

**Tuesday Evenings at the Crowfoot YMCA:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Check to **Register**  | Semester | Time | Duration | Specific Dates | Cost |
|  | **Fall 2019****Tuesday Evenings** | **5:30-6:00 pm**If a different time is preferred, please enquire via email and we will do our best to accommodate preferences. | 14 Weeks | September 10/17/24October 1/8/15/22/29November 5/12/19/26December 3/10 | $560 |