

Long Island Aquatic Club: 5495 South River Drive, Manotick ON K4M 1J3
Pool Office – 613-692-6241
SWIM LESSON APPLICATION FORM

Family Name: _____

Parents' / Guardians' First Name: _____

E-mail: _____

Address: _____

Postal Code: _____

Telephone No.: Home: _____ Business: _____ Emergency: _____

Children's Names	Birthdate (dd/mm/yy)	Age	Level	Session	Preferred Time		Cost	
					1 st Choice	2 nd Choice		
NO POST DATED CHEQUES							TOTAL:	

IF YOU ARE UNSURE OF WHAT LEVEL TO PLACE YOUR CHILD IN, PLEASE HAVE THEM ASSESSED IN EARLY JUNE

PLEASE SUBMIT SEPARATE CHEQUE FOR LESSONS
PLEASE SUBMIT WAIVER ON PAGE 9

Confirmation letters and income tax receipts will be sent out in late May. Receipt duplicates will be subject to a \$15 administrative fee. Returned cheques will be subject to a \$25 administrative fee.

If the session that you have requested is full, which other session are you able to attend? _____

I (we) confirm that the above information is correct, and I (we) agree to abide by the rules of LIAC posted at the pool. I (we) understand there are **NO REFUNDS** or payment transfers except for a medical reason with a medical doctor's certificate. An administrative fee of 20% is required. Refund deadline August 31, 2017.

Signature

Date

For safety reasons, all observers of pool lessons **must stay on the grass area** surrounding the pool. As a result of circumstances beyond our control where time is lost during lessons, **time will not be refunded or rescheduled. Only waterproof non-spray on sunscreen is permitted on site.** All persons must wait **a minimum of 20 minutes after applying sunscreen before entering the pool.** All persons **must shower before entering pool.**

I, _____, agree to the above conditions.
(Signature)

Access to the LIAC site before 1 pm weekdays is limited to children enrolled in lessons / swim team and their parent/caregiver. For Safety of Patrons and Staff and for Insurance Reasons, all Parents/Caregivers and Children are to be on the site only for the duration of the Child's Lesson/Swim Team.

PLEASE NOTE: UNSIGNED FORMS WILL NOT BE PROCESSED.

2017 SWIM LESSON SCHEDULE – RED CROSS PROGRAM

AVAILABLE TIMES FOR SESSIONS 1, 2 & 3

LEVEL

PARENT&TOT (1-3 yrs)	11:00-11:30 (<i>1st session only</i>)			
PRESCHOOL (3-5 yrs)				
SEA OTTER (P1)	9:00-9:30	9:30-10:00	10:00-10:30	11:00-11:30
SALAMANDER (P2)	8:45-9:15	9:45-10:15	10:00-10:30	11:00-11:30
SUNFISH (P3) *Can be 6	8:45-9:15	9:15-9:45	10:30-11:00	
CROCODILE (P4) *Can be 6	9:15-9:45	10:30-11:00	11:00-11:30	
WHALE (P5) *Can be 6	9:45-10:15	10:15-10:45		
CHILDREN (6-12 yrs) *Can be 5yrs old if Whale has been completed*				
SWIM KIDS 1	9:45-10:15			
SWIM KIDS 2	8:45-9:15	10:15-10:45		
SWIM KIDS 3	8:45-9:15	9:00-9:30	10:00-10:30	10:15-10:45
SWIM KIDS 4	8:15-8:45	9:00-9:30	10:15-10:45	10:45-11:15
SWIM KIDS 5	8:45-9:30	9:30-10:15	10:15-11:00	10:45-11:30
SWIM KIDS 6	8:30-9:15	9:45-10:30		
SWIM KIDS 7	8:15-9:00	9:30-10:15		
SWIM KIDS 8	8:00-9:00	<i>Session 1&2 only</i>		
SWIM KIDS 9	8:00-9:00	<i>Session 2&3 only</i>		
SWIM KIDS 10	8:00-9:00	<i>Session 2&3 only</i>		
BRONZE STAR	8:00-9:15	Session 3 only		

Schedules are not final and are subject to change.

Session Dates (10 Lessons) Mon-Fri

Session #1 July 3-July 14
Session #2 July 17-July 28
Session #3 July 31-Aug 11
Session #4 Aug 14-Aug 25

(Includes Basic First Aid CPR A)

AVAILABLE TIMES FOR SESSION 4

LEVEL

PRESCHOOL (3-5 yrs)		
SEA OTTER (P1)	9:00-9:30	10:30-11:00
SALAMANDER (P2)	9:30-10:00	10:15-10:45
SUNFISH (P3) *Can be 6	9:00-9:30	11:00-11:30
CROCODILE (P4) *Can be 6	9:00-9:30	9:30-10:00
WHALE (P5) *Can be 6	11:00-11:30	
CHILDREN (6-12 yrs) *Can be 5yrs old if Whale has been completed*		
SWIM KIDS 1	10:00-10:30	
SWIM KIDS 2	10:15-10:45	
SWIM KIDS 3	10:30-11:00	
SWIM KIDS 4	10:45-11:15	11:00-11:30
SWIM KIDS 5	10:00-10:45	10:45-11:30
SWIM KIDS 6	10:45-11:30	
SWIM KIDS 7	10:45-11:30	
BRONZE MEDALLION (See Note)	8:00-11:00	(Includes Emergency First Aid CPR B)
(Age 13 or passed Bronze Star)		
BRONZE CROSS (See Note)	8:00-10:30	
(Must have Bronze Medallion)		

½ hr. - \$81.00
 ¾ hr. - \$85.00
 1 hr. - \$95.00
Br.Star - \$105.00
Br. Med -\$195.00
Br. Cr - \$180.00

If you are unsure of your child's level please have a swim level assessment done. This is subject to a \$10.00 fee, which is waived when registering for L.I.A.C. lessons.

Note: The *Bronze Med and Cross Exams*, which could be 3 hours long, will be given sometime during the week following the end of the session, depending on the availability of the examiner.

Note: All classes will run as scheduled, unless there are an insufficient number of registrations to justify a class.

For **Adult stroke improvement** and **private swimming lessons**, please see a manager at the pool office after June 15th.

**Long Island Aquatic Club Swimming Lessons
Waiver and Release of Liability Form
(for participants under the age of 18)**

Swimmer's Name(s): _____

I, (we), the undersigned, being Parents or Guardians of the above named swimmer(s), do hereby consent to the above named swimmer(s) participating in swimming lessons at the **Long Island Aquatic Club**, include time in the water and at poolside.

I, (we), understand that the various swimming exercises and drills used in swimming lessons are not recommended for individuals who have potential medical problems unless under direct medical supervision. The swimmer(s) and his or her Parents or Guardians further agree that the above named swimmer(s) has no medical problems that would reasonably prevent their participation, and is in good health, and that the **Long Island Aquatic Club** will not be responsible for any medical or related claims as a result of any action resulting from participating with the **Long Island Aquatic** swimming lessons.

I, (we), do assume all risks and hazards incidental to swimming lesson participation and hereby irrevocably waive all claims whatever which I, (we), or the above named swimmer may have against the **Long Island Aquatic Club**.

I, (we), do hereby release, absolve, indemnify and save harmless the **Long Island Aquatic Club**, their employees, volunteers, officers, directors, lifeguards, coaches and supervisors from any claim which I (we), or the above named swimmer(s) may have as a result of his or her participation in swimming lessons.

I, (we), hereby acknowledge my (our) acceptance of this waiver and release, knowing it to be a legal document and of legal force and effect, and agree that this waiver and release is a condition of participation in the swimming lesson activities of the **Long Island Aquatic Club**.

Parent or Guardian

Date