

Q: What if my child has a fear of the water?

Please stay positive and patient. Take your child to the pool regularly. Please remember that every child must learn to swim to be safe and it takes some children longer to get over a fear of water. If your child is afraid, it may help to remove yourself from the pool area and wait where he or she can not see you.

Q: How long will it take for my child to learn to swim?

There is not a magic number of swim lessons. Swimming is a motor skill and takes practice.

Q: Will my child have the same instructor for the session?

We do our best to maintain the session consistency with instructors. However, there will be times when the regularly scheduled instructor cannot be there and will have to find a sub for the class.

Q: What is the ratio of instructors to swimmers?

We try to stick to a 5:1 ratio for swimmers. We only allow 5 students per level per session so space is very limited.

Q: How do we make-up a class?

Make-up classes are only permitted for extremely rare occasions. Make-up days are scheduled based on instructor and pool availability..

PLACE
STAMP
HERE

Batesville Parks and
Recreation

1830 Chaney Drive
Batesville, AR 72501

Contact Us

Batesville Parks and Recreation
1830 Chaney Drive
Batesville, AR 72501

870-698-2427
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Summer Swim Lessons 2016



Youth Swim Lessons for Ages 4 and up



Sessions and Information

The City of Batesville Parks and Recreation Department will be offering four sessions of swimming lessons this summer for children ages 4 to 15. Sessions are two weeks in length and classes are Monday through Thursday. All classes will be held at Fitzhugh Park Pool from 11:30 a.m. to 12:30 p.m. The cost is \$20.00 per participant per session.

SESSIONS:

Session 1	June 6 – June 17
Session 2	June 20 – July 1
Session 3	July 11 – July 22
Session 4	July 25 – Aug 5

Levels:

Level 1	Ages 4 – 5
Level 2	Ages 5 – 6
Level 3	Ages 6 – 8
Level 4	Ages 8 – 10
Level 5	Ages 10 – up

Registration Form

Last Name _____

First Name _____

Age _____ DOB _____

Address _____

City _____ State _____ Zip _____

Email Address _____

Mother's Name _____ Phone _____

Father's Name _____ Phone _____

Emergency Contact _____
(Not living in the same household)

Relation _____ Phone _____

Physician _____ Phone _____

Participant's current swim level:

1 2 3 4 5



I, the parent of the registrant, a minor, agree that I and the registrant will abide by the rules of the Parks and Recreation Department, its affiliated organizations, and sponsors. Recognizing the possibilities of physical injury associated with swimming and in consideration for the Parks and Recreation Department accepting the registrant for its swimming program and its activities, I hereby release, discharge, and/or indemnify the Parks and Recreation Department, its affiliated organizations, their sponsors, their employees, volunteers, and associated personnel, against any claims by or on behalf of the registrant as the result of the registrant's participation in the program.

Consent for Medical Treatment I hereby give my consent for emergency medical care prescribed by the duly licensed Doctor of Medicine or Dentistry. This care may be given under whatever conditions are necessary to preserve life, limb, or well-being.

Release of Image: I grant permission to the City of Batesville, its employees, and agents, to take and use visual/audio images of the registrant. Visual/Audio images are any type of recording, including photographs, digital images, drawings, renderings, voices, sounds, video clips, or accompanying written descriptions. The images may be used in any manner or media, without notifying me or the registrant, such as the City of Batesville sponsored websites, publications, promotions, broadcasts, advertisements, posters, and theater slides. I waive any right to inspect or approve the finished images or any printed or electronic matter that may be used with them. I release the City of Batesville and its employees and agents, including any firm authorized to publish and or distribute a finished product containing the images, from any claims, damages, or liability which I may ever have in connection with the taking of or use of the images or printed material used with the images. I have read this release before signing, I understand its content and I freely accept the terms.

Parents
Signature _____ Date: _____

