

2021 Swim Lessons Registration

Participants: Water Babies class is for 6 months to 3 yrs. with a parent in the water with the child.
Water Babies is always at 10:05—10:35 AM

Important Dates:

Session 1: June 7– June 17
Make Up days: June 11 & 18
Session 2: June 21 -July 1
Make Up days: June 25 & July 2
Session 3: July 5—July 15
Make Up days: July 9 & July 16

Registration Fees For Swim Lessons

Y Members—\$34
Program Participants—\$42
Scholarships Available

Fees For Swimnastics

Y Members—\$10/ PP \$15

Questions?

Call The Randolph County YMCA at 765.584.9622 or
email Tom Byrum at tom.byrum@comcast.net

**Fees must be paid for Swim Lessons at the time of
the registration**

2021 Swim Lessons/Swimnastics Form

Name : _____ Gender: M ___ F ___ DOB ___/___/___

Age: _____ Grade: _____ Allergies: _____

Check Preference: Session 1: 9:30-10 am _____ Session 1: 10:05-10:35 am _____

Session 2: 9:30-10 am _____ Session 2: 10:05-10:35 am _____

Session 3: 9:30-10 am _____ Session 3: 10:05-10:35 am _____

Address: Street _____ City: _____ Zip: _____

Phone: _____ E-Mail: _____

Father: _____ Phone: _____ Text number _____

Mother: _____ Phone: _____ Text number _____

Text me if class is cancelled: _____ (text #) Do not send me a text _____

Additional Emergency Contact: _____ Phone: _____

(In case neither parent can be reached)

Buddy Request/Notes: _____

(There is a limit of one buddy)

Lessons are held outdoors at the
Goodrich Park Pool
611 N. Union St. Winchester, IN 47394
Days of lessons are Monday thru Thurs-
day for 2 weeks
(8 days)
Friday will be make up day.
Cancellations due to weather will be
sent as a group text message.
Water Babies for ages 6 months—3 yrs
with parent in the water is always held
from 10:05-10:35

There will be Swimnastics this
summer if we have enough interest.

**We ask that all parents/
guardians that bring children for
swim lessons obey the rules for
social distancing at Goodrich
Pool.**

Randolph County YMCA
1521 E. Washington Street
Winchester, IN 47394



Please read carefully before signing

I understand there is an element of risk associated with this program. Relying on the supervision and instruction of those representing the Randolph County YMCA, I hereby accept any and all injuries, illness or occurrence resulting from participation in this YMCA program. I further attest that the above participant is physically fit and does not have any prior medical condition that may be aggravated by participating in the above program. I will also have the participants medical condition verified by a licensed medical doctor if deemed necessary.

By signing this form, I agree to pay all fees associated with the program. Date ___/___/___

Parent/Guardian Signature

Photograph Permission: By initialing this release, I give the Y permission to use photographs of myself and/or my family for stories/publications. Initial _____

Office Use Only

Y Member \$34 Date Paid ___/___/___

Program Part. \$42 Cash _____

Swimnastics \$10/\$15 Check # _____

Scholarship _____% Credit/Debit _____