

2022 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 6 – June 16
Make Up days: June 10 & 17

Session 2: June 20 -June 30
Make Up days: June 24 & July 1

Session 3: July 5—July 14
Make Up day: July 15

Registration Fees For Swim Lessons

Y Members—\$34

Program Participants—\$42

Scholarships Available

Fees For Swimnastics

Y Members—\$10/ Program Participants \$15

Swimnastics runs the same days as Swim Lessons

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 and Swimnastics at the time of registration

2022 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)

Additional Notes: _____

Lessons are held outdoors at the

**Goodrich Park Pool
611 N. Union St.
Winchester, IN 47394**

Days of lessons are Monday - Thursday
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 of
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 _____