



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Winter 2 Swim Lessons

Student's Name: _____ Age: _____

Guardian Name _____ Phone: (____) _____ - _____

POLICIES

- Fees must be paid at time of registration.
- The Y is not responsible for lost or damaged personal articles.
- A service charge of \$15 is required on returned check or credit card payments.
- Non-potty trained participants are required to wear plastic swim diapers during class times.
- Children under 12 years of age must have a parent present in the building during lesson times. Please inform your instructor of your location in case you are needed during class. All parent/guardians must present valid ID or a YMCA membership card upon entering the building.
- The Olympic Peninsula YMCA is a non-profit organization. Financial assistance is available for membership and programs. Confidential applications are available at our welcome center.

CANCELLATIONS & REFUNDS

- All cancellations will carry a \$10 fee per cancelled program.
- To receive a 100% refund (minus the cancellation fee) the Y must receive written notice prior to the start of the program.
- Fifty percent refunds will be distributed after a single meeting. No refunds will be honored after 2+ classes
- Should a child be removed from the program due to a behavioral issue, no refund or credit will be given for that program

BRANCH LIABILITY RELEASE/WAIVER

I hereby certify that I, or the above named child (if participant is under 18), am/is in normal health and capable of safely participating in Y programs. I assume all risks and hazards incidental to the conduct of this program and for the transportation to and from the program. If the participant is under the age of 18, I hereby authorize the Olympic Peninsula YMCA to obtain medical treatment for the above-named child in the event that parent and/or emergency contact cannot be reached. I support the Y program philosophy, which is based on participation, fun, health & well-being, skill development, teamwork, fair play, family involvement and volunteer leadership. I have read and agree to follow the Parents Code of Ethics. I give permission for the Olympic Peninsula YMCA to use any photos or videos taken of me, or the above named child, for future publicity purposes.

I acknowledge that no one on this form has been convicted of a sexual offense and that I have read and understand the Olympic Peninsula YMCA Refund and Cancellation policy.

Parent/Guardian Signature _____ Date _____

MW Classes January 7th through January 30th

\$35.00/Members 65.00/Community

REGISTRATION BEGINS December 19th

TTH Classes January 8th through January 31st

\$26.00/Members 49.00/Community

NO TTH CLASSES JAN 10th and JAN 24th (SHS Swim Meet)

REGISTRATION BEGINS December 19th



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Monday/Wednesday Parent Child Classes

___ 5:15-5:45 Parent Child A/B

Monday/Wednesday Preschool Classes

___ 4:00-4:30 Preschool Level 1

___ 4:00-4:30 Preschool Level 2

___ 4:35-5:05 Preschool Level 3

___ 4:35-5:05 Preschool Level 1/2

Monday/Wednesday Youth Classes

___ 5:15-5:45 Youth Level 1/2

___ 5:15-5:45 Youth Level 3/4

___ 5:50-6:20 Youth Level 3/4

___ 5:50-6:20 Youth Level 5/6

Tuesday/Thursday Preschool Classes

___ 4:00-4:30 Preschool Level 1

___ 4:00-4:30 Preschool Level 2

___ 4:35-5:05 Preschool Level 3

___ 4:35-5:05 Preschool Level 1/2

Tuesday/Thursday Youth Classes

___ 5:15-5:45 Youth Level 5/6

___ 5:15-5:45 Youth Level 1/2

___ 5:50-6:20 Youth Level 3/4

___ 5:50-6:20 Youth Level 1/2

Staff only:

Membership ID # _____ Staff initials _____

Registration checked by _____