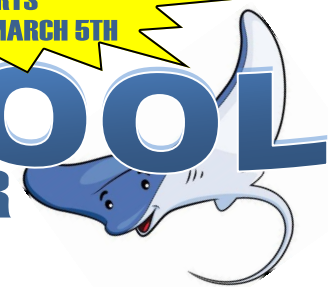




CALABASAS SWIM SCHOOL

SPRING & SUMMER

REGISTRATION STARTS MONDAY, MARCH 5TH



LEVEL DESCRIPTIONS:

LEVEL 1:	BABY PUPS & PARENT SEALS	6 MONTHS-3YRS.	SMALL POOL
INTRODUCE YOUR LITTLE ONE TO THE WATER! BUILD THEIR CONFIDENCE IN THE WATER WITH STEPPING STONES TOWARDS SWIMMING & AQUATIC SAFETY IN A FUN ENVIRONMENT. PARENT MUST ENTER WATER WITH SWIMMER. CHILD MUST WEAR SWIM DIAPER/			
LEVEL 2:	SEA HORSES	2-5 YRS.	SMALL POOL
FIRST LEVEL SWIMMERS ARE AWAY FROM THEIR PARENTS WORKING WITH OUR SWIM INSTRUCTORS. SWIMMERS ARE INTRODUCED TO WATER WHILE BECOMING COMFORTABLE IN THE WATER. MUST BE COMFORTABLE IN WATER TO MOVE UP TO SEA TURTLES.			
LEVEL 3:	SEA TURTLES	2-6YRS.	SMALL POOL
CONTINUES TO BUILD CONFIDENCE IN THE WATER WHILE WORKING ON LEARNING THE BASICS OF FRONT CRAWL AND BACKSTROKE. DIVING AND SURVIVAL SKILLS ARE ALSO INTRODUCED IN THIS LEVEL.			
LEVEL 4:	STING RAYS	5-10YRS.	MAIN POOL
BECOMING COMFORTABLE IN ALL DEPTHS OF WATER. CONTINUING TO IMPROVE THE FRONT CRAWL WITH ROTARY BREATHING, BACKSTROKE AND INTRODUCE ELEMENTARY BREASTSTROKE AND BREASTSTROKE KICK.			
LEVEL 5:	BARRACUDAS	6-12YRS	MAIN POOL
CONTINUES TO IMPROVE THE BASICS OF FRONT CRAWL, BACKSTROKE, AND BREASTSTROKE. INTRODUCE THE BASICS OF BUTTERFLY AND INTRODUCE FRONT CRAWL AND BACK STROKE FLIP TURNS.			
LEVEL 6:	GREAT WHITES	6-12YRS.	MAIN POOL
PREPARES SWIMMERS FOR COMPETITIVE SWIMMING WHILE CONTINUING TO IMPROVE TECHNIQUE ON ALL 4 STROKES AND RESCUE TECHNIQUES FOR DROWNING VICTIMS			

SPRING SESSIONS: NO SWIM LESSONS 5/28

SPRING SESSION 1A	SAT. ONLY	4/14-5/5	4 LESSONS	\$60	SWIMMERS ARE NOT AUTOMATICALLY REGISTERED FOR THE NEXT SESSION
SPRING SESSION 1B	MON.-THURS.	4/23-5/3	8 LESSONS	\$120	
SPRING SESSION 2A	MON.-THURS.	5/7-5/17	8 LESSONS	\$120	
SPRING SESSION 2B	MON.-THURS.	5/21-5/31	7 LESSONS	\$105	

SPRING DAYS/TIMES:

BABYPUPS & PARENT SEALS:	MON.-THURS. 6:00PM	SAT. 10:00AM
SEA HORSES:	MON.-THURS. 4:00PM	SAT. 10:30AM, 12:00PM, 12:30PM
SEA TURTLES:	MON.-THURS. 4:30PM, 5:00PM	SAT. 11:00AM, 12:00PM, 12:30PM
STINGRAYS:	MON.-THURS. 5:30PM, 5:30PM	SAT. 11:30AM, 11:30AM
BARRACUDAS:	MON.-THURS. 4:00PM, 5:00PM	SAT. 10:30AM
GREAT WHITES:	MON.-THURS. 4:30PM	SAT. 11:00AM



SORRY, NO MAKE UPS
SWIM LESSONS ARE 25 MINUTES



SUMMER SESSIONS: NO SWIM LESSONS 7/2-7/5

SUMMER SESSION 3A	MON.-THURS.	6/18-6/28	8 LESSONS	\$120
SUMMER SESSION 3B	SAT. ONLY	6/23-8/4	7 LESSONS	\$105
SUMMER SESSION 4A	MON.-THURS.	7/9-7/19	8 LESSONS	\$120
SUMMER SESSION 4B	MON.-THURS.	7/23-8/2	8 LESSONS	\$120

**SWIMMERS ARE NOT
AUTOMATICALLY
REGISTERED
FOR THE NEXT SESSION**

SUMMER DAYS/TIMES:

BABY PUPS & PARENT SEALS:

M-TH 9:00AM, 6:00PM
SAT. 9:00AM

STINGRAYS:

M-TH 10:00AM, 10:00AM, 10:30AM, 10:30AM,
5:00PM, 5:00PM, 5:30PM, 5:30PM
SAT. 11:00AM, 11:00AM, 11:30AM, 11:30AM

SEA HORSES:

M-TH 9:30AM, 11:00AM, 11:30AM, 12:00PM, 12:30PM, 4:00PM
SAT. 9:30AM, 12:00PM, 12:30PM

BARRACUDAS:

M-TH 9:00AM, 4:00PM
SAT. 9:30AM, 10:00AM

SEA TURTLES:

M-TH 11:00AM, 11:30AM, 12:00PM, 12:30PM, 4:30PM
SAT. 10:00AM, 10:30AM, 12:00PM, 12:30PM

GREAT WHITES:

M-TH 9:30AM, 4:30PM
SAT. 10:30AM

**SUMMER PRIVATE LESSONS
RUN CONCURRENTLY
TO GROUP LESSONS
\$28 PER LESSON**

REGISTRATION:

Adult's Name: _____ Email: _____

Address: _____ City & Zip: _____

Home Phone: _____ Cell Phone: _____

Yes, I will accept text messages from the City in case of emergency. Cell phone carrier company: _____

LEVEL:	SESSION:	TIMES:	SWIMMER'S NAME:	GENDER:	D.O.B	FEE:
REGISTRATION STARTS MONDAY, MARCH 5TH PLEASE MAKE NOTE OF SESSION DATES, DAYS, TIME AND LEVEL OF YOUR SWIMMER						PROCESSING FEE \$5
						TOTAL FEES: \$

Method of Payment: CHECK ONE Cash: _____ *Check #: _____ *WILL BE ELECTRONICALLY PROCESSED CREDIT CARD: _____

MAKE CHECKS PAYABLE TO THE CITY OF CALABASAS Name that appears on card: _____

Billing Address: _____

Card#: _____ - _____ - _____ - _____ - _____ EXPIRES: _____

The undersigned hereby agrees to defend, indemnify, and hold harmless the City of Calabasas and its officers, employees and agents from any and all loss, liability charges and expenses (including attorney's fees) and cost which may have risen of participation in any program. (The City does not provide accident, medical, worker's compensation insurance or any other insurance for program participants in any program). As parent/guardian, I hereby consent emergency treatment of my minor child as a result of accident or injury. I further agree to pay any/ and all costs incurred as a result of said treatment. I agree to carefully inspect and satisfy for myself that the facilities provided are reasonably safe for their intended use. Once having conducted the inspection, I hereby agree to expressly assume the risk of participating at the premises. I understand the City retains the right to use photos taken during activities for publicity purposes.

Adult/parent Signature: _____ Date: _____

SIGNATURE IS REQUIRED TO PROCESS REGISTRATION

Please indicate if this participant as special needs: __Visually Impaired __Hearing Impaired__ Mobility Impaired __ Learning Impaired__ Other

Needs: _____

**FORM MUST BE COMPLETE TO PROCESS
MUST REGISTER ON-SITE**

