

2010-2011 GTAC Fall/ Winter Swim School Registration

Sylvania Northview High School, 5403 Silica Dr., Sylvania OH 43560

► **Step One: Please check Your Choice of Program(s), Session(s) and Time(s)**

◆ **Small Group Swim Lessons: Six ½ hour lessons offered at 4pm or 4:30pm, Mon/Tues/Thurs**

► **Please check preferred session(s):**

- Oct 18, 19, 21, 25, 26, 28 Nov 1, 2, 4, 8, 9, 11 Nov 15, 16, 18, 29, 30, Dec 2
 Dec 6, 7, 9, 13, 14, 16 Jan 3, 4, 6, 10, 11, 13 Jan 17, 18, 20, 24, 25, 27

► **Lesson Times: Please check preferred time** 4-4:30pm 4:30-5pm **Cost: \$60/session**

► **Name(s) of Swim Lesson Registrant(s):** _____

◆ **Non-Competitive Swim Training: Nine training practices, 3:45-5pm, Mon/Tues/Thurs (Registrants must be at Level 6, 7 or 8 and able to swim 25 yards easily. Refer to Levels below.)**

- October 18, 19, 21, 25, 26, 28, Nov 1, 2, 4 **Cost: \$99/session**

► **Name(s) of Non-Competitive Registrant(s):** _____

◆ **Pre-High School Season Prep Training: Nine training practices, 3:45-5pm, Mon/Tues/Thurs**

- October 18, 19, 21, 25, 26, 28, Nov 1, 2, 4 **Cost: \$69/session**

► **Name(s) of Pre-High School Registrant(s):** _____

► **Step Two: Please review and assign a current Swimming Level to registrant(s) below*.**

Level #1: Non-Swimmer	Level #6: Freestyle w/ Rotary Breathing
Level #2: Places Head Underwater	Level #7: Freestyle and Backstroke
Level #3: Front and Back Float	Level #8: Advanced Swimmer: All Four Strokes
Level #4: Front/Back Float w/Kick	Level #9: Adult Non-Swimmer
Level #5: Freestyle w/ No Breathing	Level #10: Person with Disabilities (please provide details)

► **Step Three: Please provide us with registrant(s) information. Children must be at least 4 years old.**

Name of Registrant #1: _____ Age: _____ *Level: _____

Name of Registrant #2: _____ Age: _____ *Level: _____

Parent's Name: _____ Phone: _____

Address: _____ City/State/Zip: _____

E-mail address to best contact you: _____

► **Step Four: Please sign this Release of Liability (Required), Make Payment and Mail**

Greater Toledo Aquatic Club/Sylvania Northview High School Release of Liability:

The undersigned participant or legal guardian of the participant does hereby release the Greater Toledo Aquatic Club (GTAC) and Sylvania Northview High School from any and all claims arising out of any injury to or damages sustained by the participant in the course of participation in the instructional swimming programs operated by GTAC. By signing this Release of Liability, the undersigned intends to and does hereby waive any claims which might have otherwise been made against GTAC or Sylvania Northview High School or its employees, agents or directors.

Signature of Legal Guardian: _____ Date: _____

Fees: \$60 per registrant per session for Six Small Group Lessons

\$99 per registrant per session for Three Week Non-Competitive Swim Training

\$69 per registrant per session for Three Week Pre-High School Prep training

Please make check payable to the Greater Toledo Aquatic Club and mail with completed form to:
GTAC Swim School, 2323 W. Bancroft St., Toledo OH 43607

Please e-mail cynthiamillen@gmail.com or call 419-531-2800 with questions. Confirmation will be sent via e-mail.