

# WEST WINDSOR WATERWORKS

## 2019 SWIM LESSON SCHEDULE

DATES:   SESSION 1           JUNE 24 – JULY 5           Monday-Friday  
          SESSION 2           JULY 8 - JULY 19          Monday-Friday

### FEES FOR SWIM LESSONS:

WATERWORKS POOL MEMBER:       \$130.00 per Session, per Person

NON-WATERWORKS POOL MEMBER: \$150.00 per Session, per Person

*(To receive Member Rate you must be a Pool Member at time of registration.)*

### SESSION 1 and 2

8:45-9:25 AM	LEVEL 1
8:45-9:25 AM	LEVEL 2
8:45-9:25 AM	LEVEL 3
8:45-9:25 AM	LEVEL 4
8:45-9:25 AM	STROKE CLINIC

\*\*\* Swim Level Descriptions are listed on the next page \*\*\*

## **SWIMMING COURSE DESCRIPTIONS**

Please read each course description carefully to insure your child is enrolled in the appropriate level. To register for Levels 2-4, individuals must be able to demonstrate all the skill requirements for the previous level. Class sizes are limited.

### **Level 1**

Students should be comfortable in and around the water. Instruction includes supported float on front and back, supported kicking on front and back, entering and exiting of pool, submerging face, blowing bubbles, and water safety.

### **Level 2**

Students will begin to learn fundamental swimming skills. Instruction includes submersion under water, floating and gliding on front and back, unsupported flutter kicking on front and back, introduction to front, back crawl, and water safety.

### **Level 3**

Students will begin learning strokes and build upon the skills learned in Level II. Instruction includes jumping into deep water, introduction to diving, coordinating front and back crawl, introduction to elementary backstroke, treading water, and water safety.

### **Level 4**

Students will develop confidence in their strokes and improve skills already learned. Instruction includes improvement of front and back crawl and elementary backstroke, introduction to breaststroke and sidestroke, and water safety.

### **STROKE CLINIC**

Pre-Competitive Swim Program will improve stroke technique, introduce competitive skills and allow individuals to progress in a friendly, non-competitive atmosphere.

**PARTICIPANTS MUST BE AT LEAST LEVEL 4 AND BE ABLE TO SWIM  
FREESTYLE AND BACKSTROKE**

### **Swim Team: West Windsor Whalers**

A competitive summer swim team for ages 6-18. Emphasis is on the development and refinement of skill and technique. Must be able to swim freestyle, backstroke and breaststroke. The team participates in the Princeton Area Swimming and Diving League (PASDA).

**(Participants MUST compete in Swim Meets and Parent Involvement is required.)**

### **Dive Team: West Windsor Whalers**

A competitive dive team for ages 6-18. Must be able to swim one lap comfortably, No previous experience necessary; just the willingness to learn. The team participates in PASDA.

**(Participants MUST compete in Dive Meets and Parent Involvement is required.)**

# WATERWORKS - 2019 SWIM LESSON REGISTRATION FORM

Name of Participant: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

E-mail address: \_\_\_\_\_  
**(Needed for confirmation e-receipt and any updates for Swim Lessons)**

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Contact & Phone: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Male/Female: \_\_\_\_\_ Grade in Sept: \_\_\_\_\_

Name of Class/Level \_\_\_\_\_

Session 1 \_\_\_\_\_  
(June 24-July 5)

Session 2 \_\_\_\_\_  
(July 8 – July 19)

Fee : \_\_\_\_\_ ( to receive Member rate you MUST be a member of WaterWorks before registration).

I \_\_\_\_\_ realize there is a risk of being injured that is inherent in all sports.  
*(Participant/parent if participant is under 18).*

I realize the risk of injury may be severe, including the risk of fractures, brain injuries, or even death. I understand this and wish (my child) to participate in the above programs.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Refund Policy:** A 20% administrative fee will be deducted from all refunds. **Refunds will be given only if requested in writing 2 weeks prior to the start of each session (NO refunds will be given after that time).**

Please make checks payable to: **West Windsor Township Pool Utility**

Mail or hand-deliver to: West Windsor Township Recreation Department-  
271 Clarksville Road – P.O. Box 38 - West Windsor, NJ 08550

**DATE PROCESSED:** \_\_\_\_\_ **PAYMENT AMOUNT:** \_\_\_\_\_ **CHECK#/CASH:** \_\_\_\_\_