



**FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

LESSONS THAT LAST A LIFETIME

**Teaching kids to swim
for over 150 years**

**Register for Fall Group
Swim Lessons Today!**

October Session

Mondays & Wednesdays

October 3-October 26

Registration Deadline - September 23

November Session

Mondays & Wednesdays

Oct. 31, Nov. 2-Nov. 23

Registration Deadline - October 21

WILLIAMS YMCA OF AVERY COUNTY

436 Hospital Drive | PO Box 707, Linville, NC 28646

Telephone (828) 737-5500 | Fax (828) 737-5504

ymcaavery.org



Fall 2011 Class Times and Prices

Each session will begin the first Monday of the month. Classes are Monday and Wednesday afternoons.
There must be at least 3 signed up for a class to take place.

Class Times:	Member Fee:	Potential Member Fee:
Parent/Child (6-36mos): 3:15-3:45pm	\$40	\$50
Preschool (3-5yrs): 4:00-4:30pm	\$40	\$50
Youth (6-12yrs): 4:45-5:30pm	\$50	\$60

.....
(Detach and return this portion)

Swim Lesson Registration

Participant Name _____

Parent Name _____

Home Phone Number _____

Session _____

(Example: September session)

Class _____

(Example: Pre-K)

Time _____

(Example: 5:00-5:30)

D.O.B. _____

Age _____ Male _____ Female _____

Mailing Address _____

City _____

State _____ Zip Code _____

Phone _____

Emergency Contact _____

Emergency # _____

Medical Conditions/Special Needs _____

Please read and sign:

WAIVER OF LIABILITY: I fully assume and understand the risks of participating in Swim Lessons including death or injury due to falls, collisions with other participants, actions by hostile humans, uneven pavement, obstructions, adverse weather, sudden illness and all other risks. I attest that I am physically fit to participate. I authorize program staff, suppliers, contractors, and anyone else connected with the organization of this program, from any claim or lawsuit that may be brought at any time by me, my family, estate, heirs or assigns, arising from my participation in this program or the instruction I received.

WAIVER FOR PUBLICITY: I agree that images taken of me during this program may be used in any legal manner without payment to me. I have read and understand the terms of this document. I make this agreement and pay the program fee in exchange for the privilege of participating under the conditions of the program.

Signature

Today's Date