

**2011 Summer Swim Lessons:
Small Group or Private for Ages 6 months - Adult**

Instructor: Ms. Leah Roth

H(513)831-4212 C(513)284-0998 rothleah@yahoo.com

I will come to your backyard pool or neighborhood pool for your convenience.

If you don't have access to a pool, I can make arrangements.

Small Group Lesson (3 children same time together)	30 min.	\$7 each child/lesson
Semi-Private Lesson (2 children same time together)	30 min.	\$10 each child/lesson
Private Lesson (1 child)	30 min.	\$14 /lesson
Private Lesson (1 child)	15 min.	\$7 /lesson

Please review the American Red Cross Skills for Each Level document to enroll your child in the appropriate class. An informal evaluation/assessment of individual current levels will take place during the first few minutes of the first lesson. Instruction will then be individualized in accordance with student needs.

To enroll, please complete and return the registration and waiver form.

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Registration Form**

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Child's Name: _____ Birth Date: _____ Sex: M F Age: _____
Class/Level: _____ Private/Group (circle) 15/30min. (circle)

Child's Name: _____ Birth Date: _____ Sex: M F Age: _____
Class/Level: _____ Private/Group (circle) 15/30min. (circle)

Child's Name: _____ Birth Date: _____ Sex: M F Age: _____
Class/Level: _____ Private/Group (circle) 15/30min. (circle)

Parents'/Guardians' Name: _____

Home Telephone: _____ Cell: _____

Address/City/State/Zip: _____

Cell Phone for the person bringing your child to lessons (if different than above): _____

IF NOT AVAILABLE IN AN EMERGENCY, PLEASE NOTIFY:

Name: _____ Telephone: _____ Cell: _____

Relationship to child: _____

*** Children who have (or have had) tubes in their ears, may have trouble putting their ears under water. If your child has this issue, you may want to have your child use ear plugs. Below are some questions that may be helpful in working with your child during swim lessons.

Has your child had any serious illness, injury, or operation? If yes, give dates and explanation. _____

Does your child take any medications? If yes, indicate types and effects on child. _____

Does your child have a physical or mental disability about which the instructor needs to be aware for instructional modifications or emergency purposes? _____

Does your child have any specific fears of the water? _____