

American Red Cross SWIM LESSONS Levels I to VI

BOYS & GIRLS-Ages 5 & older as of October 15, 2011

BOWDOIN COLLEGE, GREASON POOL at FARLEY FIELD HOUSE

SESSION I:

July 11 to July 22
Monday – Friday
Classes offered at 8:00 or 9:00 a.m.
Brunswick Residents \$48.00
Non-Residents \$64.00

SESSION II:

July 25 to August 5
Monday - Friday
Classes offered at 8:00 or 9:00 a.m.
Brunswick Residents \$48.00
Non-Residents \$64.00



The Brunswick Parks and Recreation Department is offering American Red Cross Swim Lessons this summer at the Bowdoin College, Greason Pool. Historically, this program has been extremely popular. The pool at Bowdoin is suited for both shallow and deep water instruction. The 10-lesson program offers instruction in Levels I through VI. Participants must arrange for their own transportation. **Health Insurance is a requirement in order to participate in this program. Policy information must be filled out below.** Registrations are accepted at the Brunswick Recreation Center, 30 Federal St. For more information call 725-6656. Visit us online at www.brunswickme.org/parkrec

The Parks and Recreation Department encourages individuals with disabilities to register for this program. Should you desire further information, contact the Recreation Department at 725-6656. To see our refund policy, visit us at www.brunswickme.org/parkrec

✂**Detach & return with fee to the Recreation Center, 30 Federal St., by July 8, 2011.** Office hours Mon-Fri, 8:00 a.m. to 4:30 p.m. ✂

**BRUNSWICK PARKS & REC DEPT.
SWIM LESSONS, BOWDOIN 2011**

FEE: Sessions I & II \$48 Res. / \$64 NR (per session)

For Office Use

Date _____

Amt\$ _____

Rec# _____

Computer

Please Print

NAME _____ BOY GIRL AGE as of 10/15/11 _____

STREET ADDRESS _____ TOWN _____

ZIP _____ HOME PHONE _____

WORK PHONE _____ CELL/PAGER _____ EMAIL _____

SCHOOL _____ GRADE _____ DATE OF BIRTH _____

HEALTH INSURANCE CARRIER _____ GROUP # _____ POLICY # _____

EMERGENCY CONTACT (other than parent): _____

DAY PHONE _____ CELL _____

PLEASE CHECK (✓) PREFERRED SESSION/TIME(S):

SESSION I 8:00 a.m. (121176-01)
 Level I Level II Level III Level IV Level V Level VI

SESSION I 9:00 a.m. (121176-02)
 Level I Level II Level III Level IV

SESSION II 8:00 a.m. (121176-03)
 Level I Level II Level III Level IV Level V Level VI

SESSION II 9:00 a.m. (121176-04)
 Level I Level II Level III Level IV

*ALLERGIES/PHYSICAL or EMOTIONAL LIMITATIONS _____



*WOULD YOU LIKE TO BE CONTACTED BY OUR THERAPEUTIC RECREATION COORDINATOR REGARDING THE ABOVE? YES NO

I give permission for my, above named, child to participate in the American Red Cross Swim Program at Bowdoin College, Greason Pool.

Signature of Parent/Guardian _____ DATE _____

PARENT/GUARDIAN NAME (S) Please Print _____