



Community Swim

At Greason Pool, Farley Field House, Bowdoin College

Ages 4 to 104 - Sunday's 1:30 – 2:30 pm

- ❖ January 8, 15, 22, 29, February 5, 19, 26, March 5, 12
- ❖ **There will be no swimming on Sunday, Feb 12 due to a previously scheduled event at Bowdoin.*
- ❖ **Brunswick Residents:** \$30 per person (entire season)
 - \$60 per family (entire season)
- ❖ **Non-Resident:** \$40 per person (entire season)
 - \$78 per family (entire season)



Is your New Year's Resolution to get fit? It's after the Christmas season and it's still cold and the snow is piled up, what is there to do? Come warm up with the family and get some exercise with an open swim program. **You must register in advance for this program; no drop-ins will be admitted.**

You can pick up and drop off registrations at the Brunswick Recreation Center, located at 220 Neptune Drive. For more information please call 725-6656 or check us out at www.brunswickme.org/departments/parks-recreation/.

Medical insurance is REQUIRED to participate in this program
Red cross certified lifeguards will be on duty throughout this program

Bowdoin College Pool Regulations

All children must be under the supervision of a parent or guardian at all times.*Preschoolers must be toilet-trained.*Non-Swimmers may use gallery area, accessible via the upstairs lounge.*No food or drinks are allowed in the locker rooms or on the pool deck.*Street shoes are not allowed on the pool deck.*There's no running on the premises.*There will be no admittance to any other area of the Field House except the locker rooms. You can't walk on the indoor track.*Violation of these rules will mean forfeiture of swim privileges.

✂**Detach & return to the Recreation Center, 220 Neptune Drive by Jan. 5, 2017.** Office hours Mon-Fri, 8:00 a.m. to 4:30 p.m. ✂

BRUNSWICK PARKS & REC DEPT. COMMUNITY SWIM FEE: Ind. \$30 Res. / \$40 NR **Family.** \$60 Res. / \$78 NR

Please check: **Family** (list immediate family members living in your household, below) **Individual(s)**

NAME _____ MALE FEMALE AGE _____

STREET ADDRESS _____ TOWN _____ ZIP _____

HOME PHONE _____ WK PHONE _____

CELL/PAGER _____ EMAIL _____

HEALTH INSURANCE CARRIER _____ GROUP # _____ POLICY # _____

For Office Use
Date _____
Amt\$ _____
#356176-01
Computer <input type="checkbox"/>

As a parent, I give my child permission to participate in the Brunswick Parks and Recreation Department Community Swim program. I understand that photographs taken of Parks and Recreation Programs may be used by the Parks and Recreation Department for promoting programs, classes or events to include brochures, posters or web page postings.

Signature of Parent/Guardian _____

Names of Parents/Guardians _____ (PLEASE PRINT)