

WATER BABIES

teach your child to be safe in and around the water

Water Babies teaches parents the skills to do holds & moves and help their child become comfortable going underwater. Parents will bond with their child as they develop fundamentals of water safety and prepare for a safe a secure summer.

- Group lessons (instructor/participant ratio 1:4)
- Parent & Child bonding (parent MUST be in water with their child)
- For ages 6-24 months
- 4-week session, 2 classes/week
- Cost: \$99/member, \$125/non-member

schedule on back

502-426-8820 • www.blairwood.com

taught by

**Emily
Kring**



Emily is a Level 2 ASCA Certified Coach with 14 years of teaching experience and is certified in infant and preschool by SwimAmerica. Emily coaches private lessons, Stroke School, and Swim Team at Blairwood and is an Assistant Coach at Sacred Heart Academy.

WATER BABIES with Emily Krings

CLASS – please select day/time

APRIL

Cost: \$99/member, \$125 non-member

MON/WED (April 8 - May 1)

- 9:30-10:00am (6-12 months)
- 10:30-11:00am (13-24 months)

TUES/THURS (April 9 – May 2)

- 9:30-10:00am (13-24 months)
- 10:30-11:00am (6-12 months)

MAY

Cost: \$99/member, \$125 non-member

MON/WED (May 6 – May 29)

- 9:30-10:00am (6-12 months)
- 10:30-11:00am (13-24 months)

TUES/THURS (May 7 – May 30)

- 9:30-10:00am (13-24 months)
- 10:30-11:00am (6-12 months)

SWIMMER INFORMATION – please complete all fields

Swimmer First Name: _____ Swimmer Last Name: _____

Age: _____ Date of Birth: _____ / _____ / _____

Parent First Name: _____ Parent Last Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Cell Phone: _____

PAYMENT INFORMATION – please complete (full payment due with registration)

Type of Payment: Check Cash Visa Mastercard Amex Discover

Cardholder Name: _____ Amount to be Charged: \$ _____

Card #: _____ Exp Date: _____ / _____ CID#: _____

Signature of Cardholder: _____

Parent/Guardian Agreement - *Please read carefully and sign below:*

In consideration of registering my child (or dependent, if Guardian; both hereinafter referred to as "Participant") for Blairwood SwimAmerica Swim Lessons and/or Stroke School at Blairwood Tennis, Swim and Fitness Club ("Blairwood"), I certify that Participant is of normal health and in proper physical condition to participate in the swim clinics, and has not been otherwise informed by a physician. On behalf of Participant, I acknowledge that I am aware of the risks inherent in participating in swimming (both practice and competition); that swimming is a physical sport which can require considerable physical exertion and could potentially lead to overheating and dehydration; possible limb injuries; possible permanent disability and death; and agree to assume all of those risks and to waive any and all rights to claims for injuries, loss or damages arising out of the Participant's participation in the clinics(s). I further certify that the Participant maintains *adequate health insurance* to cover any injuries occurring as a result of participation in the Clinics(s) at Blairwood. In the event I cannot be reached in an emergency, I hereby give permission to the Blairwood staff to secure emergency medical services, including transportation and physician. **PRESS/MEDIA RELEASE:** We permit the free use of our name and family members names and pictures used on this application in broadcasts, telecasts, newspapers, brochures, and any other form of communication to which such use may be applied.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____