



For Youth Development
For Healthy Living
For Social Responsibility

Kaua'i Ohana YMCA SWIM LESSON PROGRAM

2023 Session 13 October 16 – November 5

****Please see our YMCA Swim Lesson LEVELS posted on our bulletin board
or online to correctly place your child based on their current ability.**

Please CIRCLE the class you are signing up for:

Monday/Wednesday

10/16,10/18,10/23,10/25,10/30,11/1

3:00-3:30 **Beginner 3-5 yrs**

3:30-4:00 **Beginner 6 and up**

4:00-4:30 **Advanced Beginner 6 and up**

Tuesday/Thursday

10/17,10/19,10/24,10/26,10/31,11/2

3:00-3:30 **Beginner 3-5 yrs**

3:30-4:00 **Advanced Beginner 4-5 yrs**

4:00-4:30 **Advanced Beginner 6 and up**

4:30-5:00 **Intermediate**

Saturday/Sunday

10/21,10/22,10/28,10/29,11/4,11/5

11:45-12:15 **Beginner 3-5**

12:15-12:45 **Advanced Beginner 4-5**

12:45-1:15 **Advanced Beginner 6 and up**

3:30-4:00 **Beginner 3-5 yrs**

4:00-4:30 **Beginner 6 and up**

4:30-5:00 **Advanced Beginner 6 and up**

NO REFUNDS GIVEN

**** Registration Form and Class Fee must be turned in to the Kauai Ohana YMCA located at 4477 Nuhou St, Lihue prior to the start of the class to reserve a spot in class. CLASSES MAY BE RESCHEDULED DUE TO WEATHER CONDITIONS BASED ON DAILY CONDITIONS. Any missed classes for dates not rescheduled by the YMCA can be made up at the discretion of the instructor, but may not be possible.**

COST: Kauai Ohana YMCA members - \$110; Non-Members - \$150 (this \$150 includes membership for the swimmer ONLY for the duration of the enrolled session. Family members & guests are required to pay \$10/ea. to use the facilities.)

STUDENT NAME: _____ AGE: _____ PARENT/GUARDIAN NAME: _____

ADDRESS: _____ EMAIL: _____

PHONE: _____ ALT PHONE: _____

As the parent/guardian of a child in this YMCA activity, I acknowledge by signing this form that the YMCA of Kauai and its instructors, will not be held responsible or liable for any injury or accident that my child may incur during the time this activity is being held. The YMCA reserves the right to limit the size of all classes or programs.

Parent/Guardian Signature: _____ Date: _____