



# 2017 Buncombe County Free Swim Lessons

Swim Club Management Group of Asheville, Inc.  
Learn-To-Swim School - 2017

Swim Club Management Group of Asheville believes in providing children with a positive environment in which they can feel comfortable and learn basic water safety. We feel that through patience, encouragement, and frequent repetition of skills, your child will have a fun, safe and rewarding swimming experience.

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**We will be holding FREE Swim Lessons on Saturdays in July!**



## **At The Following Locations:**

July 8<sup>th</sup> Hominy Valley and Owen Pool

July 22<sup>nd</sup> Erwin and North Buncombe Pool

### **Tadpole I and II (Ages 3-6)\*: Class time 10:30 – 11:00.**

**Tadpole I:** class is for a child who may be apprehensive in the water or who has never had swim lessons. Participants may not be comfortable with their face getting wet. This class introduces new little swimmers to the pool and helps them become acquainted with the pool and the use of flotation devices. Little swimmers will develop safe water habits in a fun and encouraging environment.

**Tadpole II:** class is for the beginner swimmer who is comfortable in the water but has not yet mastered certain skills. Participants should be comfortable well-adjusted to the water (don't mind getting their face wet) and eager to learn kicking and progressive paddle-stroke. Additionally they learn more about pool safety and developing independent floating skills.

### **Minnows I and II (Ages 6-9)\*: Class time 11:15 – 11:45.**

**Minnow I:** swimmers learn front and back floating skills, the paddle-stroke, flutter kick, elementary backstroke, personal safety and the use of flotation devices. This class is for the school-age swimmer who has never had swim lessons.

**Minnows II :** swimmers continue to build confidence in their abilities by practicing paddle-stroke skills, floating, and rotary breathing without the aid of flotation devices. Children learn new skills such as treading water and survival floating. Lead-up strokes to the front crawl, back-stroke, sidestroke, breaststroke and elementary backstroke are also introduced at this level. Students must be comfortable in the deep end and be able to swim 25 yards without a flotation device.

## **Stroke Clinic for Advanced Swimmers July 15<sup>th</sup> at Cane Creek Pool**

### **Stroke Clinic (Ages 8 & Up): 11:00-11:45**

- **STROKE CLINIC** is an advanced level where students focus on stroke enhancements and more endurance. Open turns and treading water with rotary kick are introduced to students at this level. Students are also introduced to all four strokes: the butterfly, backstroke, breaststroke, and the freestyle



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## ENROLLMENT FORM

Please complete one form for each child enrolled in Swim School, and for each session enrolled.

Please Print:

Child's Name \_\_\_\_\_

Age \_\_\_\_\_ Level \_\_\_\_\_

Session \_\_\_\_\_ Class Time \_\_\_\_\_

Pool Name \_\_\_\_\_

Parent or Guardian's Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

**Enrollment is available during pool hours ONLY and must be done in person.  
We will not take any early registrations or payments.**

For Swim School Staff Only:

Session(s) \_\_\_\_\_

Time(s) \_\_\_\_\_



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## WAIVER/RELEASE OF LIABILITY

**PLEASE READ CAREFULLY BEFORE SIGNING.**

**THIS IS A RELEASE OF LIABILITY AND WAIVER OF CERTAIN LEGAL RIGHTS.**

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I, \_\_\_\_\_, the enrolled participant, and/or the parent/guardian of the participant agree and understand that swimming is a hazardous activity. I recognize that there are risks inherent in the sport of swimming, including but not limited to, paralyzing injuries and death.

The participant hereby agrees to participate in SCMG Swim/School and hereby agrees to indemnify and hold harmless SCMG Swim/School, SCMG, coaches, officers, directors, agents, and employees against any liability resulting from any injury that may occur to the participant while participating in the lessons. The participant also agrees to indemnify SCMG for any damages incurred or arising from any claims, demands, actions, or causes of action by the participant.

The participant authorizes any representative of the Swim/School staff to have the participant treated in any medical emergency during his/her participation in the lessons. Further, the participant and/or parent/guardian agree to pay all costs associated with medical care and transport for the participant.

I HAVE READ CAREFULLY THE ABOVE LIABILITY RELEASE AND SIGN IT WITH FULL KNOWLEDGE OF ITS CONTENTS AND SIGNIFICANCE.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Participant or Parent/Guardian)

Phone: \_\_\_\_\_

Emergency Contact and Phone: \_\_\_\_\_

Medical or Health Conditions that Swim Staff Should Know About: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_