



**FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

**Berkshire Family YMCA's PITTSFIELD BRANCH:
Swim Lessons Registration Form (November 12, 2019 – January 4, 2020)**

Swimmer's Last Name: _____ First Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Date of Birth: _____ Age: _____ Male Female Y Membership Expire Date: _____

Name of Parents/Guardians:

Parent/Guardian: _____ Phone (H): _____ Phone (C): _____ Email: _____
Other Emergency Contact: _____ Phone (H): _____ Phone (C): _____

FAMILY MEMBER PRICING BELOW

\$25- preschool & \$40-youth

✓	Level	Day	Time
	Swim Starters (0-3 years)	TUES	4:00-4:30p
	Swim Basics- Level 1 (3-6)	TUES	4:30-5:00p
	Swim Basics- Level 2 (3-6)	TUES	5:00-5:30p
	Swim Basics- Level 3 (3-6)	TUES	5:30-6:00p
	Swim Strokes- Level 4 (6-12)	TUES	4:00-4:45p
	Swim Strokes- Level 5 (6-12)	TUES	4:45-5:30p

YOUTH MEMBER PRICING BELOW

\$35-preschool-& \$50-youth

✓	Level	Day	Time
	Swim Basics- Level 1 (3-6)	THUR	4:00-4:30p
	Swim Basics- Level 2 (3-6)	THUR	4:30-5:00p
	Swim Basics- Level 2 (3-6)	THUR	5:00-5:30p
	Swim Basics- Level 3 (3-6)	THUR	5:30-6:00p
	Swim Strokes- Level 4 (6-12)	THUR	4:00-4:45p
	Swim Strokes- Level 5 (6-12)	THUR	4:45-5:30p

✓	Level	Day	Time
	Swim Starters (0-3 years)	SAT	8:30-9:00a
	Swim Basics- Level 1 (3-6)	SAT	9:00-9:30a
	Swim Basics- Level 1 (3-6)	SAT	10:30-11:00a
	Swim Basics- Level 2 (3-6)	SAT	9:30-10:00a
	Swim Basics- Level 2 (3-6)	SAT	11:00-11:30a
	Swim Basics- Level 3 (3-6)	SAT	10:30-11:00a
	Swim Strokes- Level 4 (6-12)	SAT	9:00-9:45a
	Swim Strokes- Level 5 (6-12)	SAT	9:45-10:30a
	Swim Strokes- Level 6 (6-12)	SAT	10:30-11:15a

✓	Level	Day	Time
	Swim Starters (0-3 years) *4 week session	TUES & THUR	11:30-12:00a

Parents are asked to watch from the observation deck. There is **NO OPEN SWIM DURING SWIM LESSONS**
At least 2 children must be enrolled in a class for it to run. Class dates/times may change to accommodate enrollment.

WAIVER/RELEASE

- I certify that my child is in normal health and capable of participating in the Y's youth athletics. I do acknowledge the risk of injury is possible. I grant permission for my child to play and in doing so I hereby release all rights and claims for injuries and damages I may have against the Pittsfield Family YMCA, its board, managers, employees, officials, volunteers and coaches. If medical attention is required, I give my permission for such medical care when either the emergency contact person or I cannot be notified. I understand that the Pittsfield Family YMCA does not carry accident insurance on program participants.
- I agree the Y may photo or videotape my child and use it for its promotion.
- Parents are responsible for providing transportation for their child to/from this class.
- I support the Y program philosophy, which is based on participation, fun, physical fitness and health, skill development, teamwork, fair play, family involvement and volunteer leadership. **MEDICAL CERTIFICATION** If your child has any allergies, asthmatic conditions or any hindrances that may affect his/her ability to participate, please list:

In witness thereof, **I have executed this registration, waiver/release and medical certification form with full knowledge of its contents** on this date: _____

Parent/Guardian's signature

Parent/Guardian Printed name

BERKSHIRE FAMILY YMCA: www.berkshirefamilyymca.org

Pittsfield (Corporate Office): 292 North Street, Pittsfield, MA 01201 P: 413-499-7650 F: 413-443-6791

Northern Berkshire: 22 Brickyard Court, North Adams, MA 01247 P: 413-663-6529