



SWIM FOR LIFE

FREE WATER SAFETY & SWIM LESSONS



Many people within our community often do not learn the critical water safety and swimming skills to keep them safe. The Y is working to address this important issue by offering Swim for Life, a free water safety and swimming program. Swim for Life is a great opportunity for children and adults to learn the basics of swimming and water safety.

WHAT WILL YOU LEARN AFTER COMPLETING SWIM FOR LIFE?

- Each class is divided into two parts: instruction and water safety
- Participants receive specific instruction from a certified instructor tailored to their swim level
- Participants learn how to assist a struggling swimmer without jeopardizing their own safety
- Participants learn how to help others in the water and show them basic swim skills

WHY OFFER FREE SWIM LESSONS?

The YMCA is partnering with Brunswick Community College, the Jack Helbig Memorial Foundation and Blue Cross & Blue Shield to expand its Swim for Life program. The goal is to help more people learn basic swimming and water safety skills in Southeastern NC to save more lives. Our driving mission is to change lives by supporting and connecting with our community, and Swim for Life is just one of the ways we can better serve our community's needs.

DATES

Tuesday, April 3rd - Friday, April 6th

TIMES

You must attend the same time slot each day
4:00-5:00pm
5:30-6:30pm

LOCATION

Brunswick Community College
BCC Fitness & Aquatics Center
210 College Rd
Bolivia, NC 28422
910-846-2348

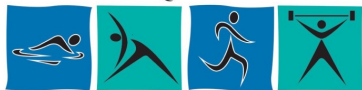


HOW TO REGISTER

Registration forms can be found on the YMCA website, at the Wilmington Family YMCA pool facility, on the BCC website and at the BCC Fitness & Aquatics center. To register for this program you must call the BCC Fitness & Aquatics Center at 910-846-2348 or email at hartzella@brunswickcc.edu.

THANK YOU TO OUR COMMUNITY PARTNERS AND SPONSORS

FITNESS & AQUATICS CENTER



BRUNSWICK COMMUNITY COLLEGE | DINAH E. GORE BLDG.



BlueCross
BlueShield





SWIM FOR LIFE REGISTRATION

At Brunswick Community College

Participant's Legal Name: _____ Preferred Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Age: _____ Date of Birth: _____ Best Phone Number: _____ (c) (h) (w)

Parent's Name: _____ Parent's Email: _____

Other Phone Number: _____ (c) (h) (w)

In case of emergency, please notify the following person (if parent cannot be reached):

Name: _____

Best Phone Number: _____ (c) (h) (w) Other Phone Number: _____ (c) (h) (w)

Session

Youth Ages 5-15 4:00-5:00pm 5:30-6:30pm Comfort level in water: _____

Adults Ages 16 & Up 4:00-5:00pm 5:30-6:30pm Comfort level in water: _____

Dates: Swim for Life Spring Session will be held Tuesday, April 3rd - Friday, April 6th, 2018

Spaces are limited, and awarded on a first come first serve basis.

Location: The pool is located at 210 College Road Bolivia, NC 28422

SWIM LESSON POLICIES

WAIVER & RELEASE: Swim lessons

I do hereby acknowledge and understand that my and/or my child's participation in the swim lesson program is purely and entirely voluntary, and that there are certain substantial and inherent risks involved in swim lesson participation. I further acknowledge that the BCC Fitness & Aquatics Center shall not in any way be responsible or liable for any injuries, ailments, infirmities, and/or disabilities which I and/or my child may encounter or sustain as the result of swim lesson participation or while in the facility. I understand the nature of potential risks from injury, and I agree to accept those risks. The instructor has permission to seek medical attention for me and/or my child, and I grant permission for the physician and staff at Brunswick Community College or other designated physicians to provide medical treatment in the event of injury or sickness*. I understand that I will be financially responsible for any medical attention deemed necessary and that my medical insurance shall be the insurance coverage for any medical treatment administered to myself or my child. I, the participant and/or parent (guardian), do hereby agree to the above waiver and release.

Signature of Participant **-OR-** Parent/Guardian (If participant is under18):

Date: _____

Parent or Guardian will be contacted in case of emergency.

Special Needs? (Please list) _____

Photography Waiver: By signing this form, parents permit the YMCA to use their child's picture as a program participant in promotional literature, promotional videos and the Wilmington Family YMCA Web site, which are published and used by the YMCA.

I have read, understand, and will abide to all the policies stated above and on the back of this receipt.

Parent/Guardian Signature

Date: _____