



**Rose E. Schneider Family YMCA
Private Swim Lesson Program
Participant Application**

Office Use Only: Date received: _____ Instructor: _____ Paid: _____

Date: _____

Participant Information:

Name _____ Birthdate _____

Name of Parent or Guardian *(if under 18 years of age)* _____

Phone # _____ Alternative # _____ E-mail _____

Home Address _____

_____ (City) _____ (State) _____ (Zip)

Are you a member of the YMCA? _____

Getting to Know YOU (continued on back)!

1.) Have you ever participated in our YMCA group swim lesson program? Yes _____ No _____

If yes, last level completed _____

2.) Would you like to request a specific YMCA swim lesson instructor? _____ If Yes, Who? _____

3.) Briefly explain your ability level in the water

(ex: can swim a specific distance with face in or out of water, primarily swim on top or under water, comfortable swimming on back)

4.) Do you prefer a specific teaching style *(ex: very structured vs. flexible based on your lead)*?

5.) Do you have any specific needs we should be aware of in order to enhance the quality of your lesson experience?

6.) Please indicate your availability on the following calendar. Here are some helpful guidelines for completing the availability calendar:

- * The more days/times you mark as an option, the better chance you have of being assigned to an instructor
- * Please indicate blocks of times you would be available for a lesson
- * Please note that No Private Lessons will be scheduled during our Group Lesson Times
- * **NO SHOW POLICY: If you do not show up or give your instructor at least 24 hours notification, you will be deducted one of your seven lessons.**
Please initial that you are aware of our NO SHOW POLICY: _____

	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>	<i>Sunday</i>
5:30-9:00AM							<i>CLOSED</i>
9:00-9:30AM							
9:30-10:00AM							
10:00-10:30AM							
10:30-11:00AM							
11:00-11:30AM							
11:30-12:00PM							
12:00-12:30PM							
12:30-1:00PM							
1:00-1:30PM							
1:30-2:00PM							
2:00-2:30PM							
2:30-3:00PM							
3:00-3:30PM							
3:30-4:00PM							
4:00-4:30PM							
4:30-5:00PM							
5:00-5:30PM							
5:30-6:00PM							<i>CLOSED</i>
6:00-6:30PM							
6:30-7:30PM							
7:30-8:30PM						<i>CLOSED</i>	
8:30-9:30PM							

Thank you for your application! We will contact you regarding the available spots in our program.

If you have any questions, please feel free to contact our Aquatics Director,

Karen Guise, at 724-452-9122, x230 or kguise@bcfymca.org.