



Session 1

February 3-27, Mon./Thur.
Water Babies: 5:30-6:00 p.m.
Preschool: 6:10-6:50 p.m.

Session 2

March 2-April 2, Mon./Thur.
(No Class April 16th & 19th.)
Water Babies: 5:30-6:00 p.m.
Preschool: 6:10-6:50 p.m.
Preschool: 7:00-7:40



FEE: (Per Session)
\$60 Member
\$70 Non-Member

Phone:573-986-4468

2126 Independence St.
Cape Girardeau, MO 63703

SUGGESTED AGE GROUPS:

Water Babies: 6mo.-2yrs.

Helps young children ages 6 mo.- 2 yrs. become comfortable in & around the water so they are ready to learn to swim. Parent & Child Aquatics gives parents information and techniques to help orient their children to the water and to supervise water activities in a safe manner.

Preschool (Level 1-2): 3-5

Swimmers learn basics of swimming: bobbing, going under water, supported front and back floating, supported rolling over from front to back and back to front, supported gliding, supported flutter kick, supported front crawl arms and jumping in.

NOTE:

- * There must be at least 4 participants signed up & paid for class to be held in full.
- * Make-up's are not permitted unless cancellations are due to weather.



HealthPoint Learn-To-Swim Program

Participant Information

Participant Name: _____ Birth Date: _____ Age: _____

Sex: _____ Phone: _____ Mobile: _____

Street Address: _____ State: _____ Zip: _____

Email Address: _____

Emergency Information

Emergency/Parent Contact: _____ Relationship: _____

Telephone: _____ Mobile: _____

Medical Information

Does the participant have any medical condition the instructor should be aware of?

Circle one: Yes No If yes, please explain:

SESSION 1	SESSION 2
February 3-27, Monday/Thursday	March 2-April 2, Monday/Thursday
<input type="checkbox"/> WATER BABIES, 5:30 PM	<input type="checkbox"/> WATER BABIES, 5:30 PM
<input type="checkbox"/> PRESCHOOL, 6:10 PM	<input type="checkbox"/> PRESCHOOL, 6:10 PM
	<input type="checkbox"/> PRESCHOOL, 7:00 PM

Course Sign-Up Information: (Please check the class in which you wish to register.)

Member \$60.00 Non-Member \$70.00

Indicate Payment Type: Credit Card Cash Check

Card type: _____ Card # _____ EXP: _____ Paid _____

Southeast Missouri Hospital's Swimming Lesson Program is intended to help participants learn to swim, which involves a considerable amount of physical activity. I understand that during participation of swimming lessons the participant may be exposed to a variety of hazards and risks, foreseen or unforeseen, which are inherent in each activity and cannot be eliminated without destroying the unique character of the activity. These inherent risks include, but are not limited to, the dangers of serious personal injury, or death from exposure to the hazards of the use of the facility. I know that injuries and death can occur by natural causes or activities of other persons, or the nature of the activity, either as a result of negligence or because of other reasons. By signing your child and/or yourself up for this program you are voluntarily assuming the possibility that a medical emergency might occur, and you agree to not hold Southeast Missouri Hospital liable for this kind of personal injury or illness. If our swim instructors have reason to believe that the participant is at high risk for experiencing a serious medical problem, they may suspend participation pending receipt of a physician's recommendation.

Signature: _____ Date: _____

(Parent's signature required for all participants less than 18 years of age.)