

KIDS Group Learn to Swim Program Spring 2023



Session 1

March 7-23

Water Babies, 5:30pm

Preschool, 6:00pm

Preschool, 6:30pm

Session 2

April 4-20

Preschool, 5:30pm

Preschool, 6:00pm

Beginner, 6:30pm

Session 3

May 2-18

Water Babies, 5:30pm

Preschool, 6:00pm

Preschool, 6:30pm



Fee: (Per Session)

\$65 Member

\$75 Non-Member

Water Babies:

Parents learn information & techniques to help orient their baby to the water and build skills/confidence. *Adult must accompany child in the water. Suggested ages 6 months to 3 years.

Preschool:

Preschool aged children learn basic water safety & aquatic/swimming skills to include supported floats, submerging, glides and arm/ leg movements. Suggested ages 3 to 5 years – approximately.

Beginner:

Children learn beginner strokes & water safety. Students should already be able to swim forward, float on his/her back & be able to jump in by him/herself. Stroke Readiness: ages 5-7 years - approximately.

**Private small group lessons (2-3 participants) and private individual swimming lessons are also available. Pick up a registration/request form at the front desk or email amoeckel@sehealth.org for more information.*



HealthPoint Fitness

2126 Independence St.

Cape Girardeau, MO 63701

Email: amoeckel@sehealth.org

- Sessions include 6 x 30 min. classes
- Classes held on Tuesday & Thursday evenings
- 2 nights a week for 3 weeks.

*Must have a minimum of 3 participants to offer the full session.

HEALTHPOINT LEARN-TO-SWIM REGISTRATION

PARTICIPANT INFORMATION:

Swimmers Name: _____ Age: _____ DOB: _____ Sex: _____

Address: _____ State: _____ Zip: _____

Does the participant have any medical condition the instructor should be aware of? ☐ YES ☐ No (If yes, please explain)

Please check all that apply to participant:

- ☐ Has had previous swim instruction ☐ Is fearful of the water ☐ Is confident in the water
☐ Has never had swim instruction/lessons ☐ No water experience ☐ Comfort level unknown

GUARDIAN INFORMATION:

Emergency/Parent Contact: _____ Relationship: _____

Phone: _____ E-mail: _____

Secondary Contact: _____ Relationship: _____ Phone: _____

Would you be ok with texting as a form of communication with swim instructor? ☐ YES ☐ No

Session 1 MARCH 7-23	Session 3 APRIL 4-20	Session 4 MAY 2-18
<input type="checkbox"/> Water Babies, 5:30pm	<input type="checkbox"/> Preschool, 5:30pm	<input type="checkbox"/> Water Babies, 5:30pm
<input type="checkbox"/> Preschool, 6:00pm	<input type="checkbox"/> Preschool, 6:00pm	<input type="checkbox"/> Preschool, 6:00pm
<input type="checkbox"/> Preschool, 6:30pm	<input type="checkbox"/> Beginner, 6:30pm	<input type="checkbox"/> Preschool, 6:30pm

☐ Member: \$65.00 ☐ Non-Member: \$75.00

Indicate Payment Type: ☐ Credit Card ☐ Cash ☐ Check

Card Type: _____ Card #: _____ EXP: _____ CVV: _____

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.)