

Jordan Memorial Pool  
Swim Lesson Registration 2019

Swimmer's Name: \_\_\_\_\_  
Age (must be UPK graduate through 6<sup>th</sup> grade): \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Parent/Guardian Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone (Home): \_\_\_\_\_ Phone (Work): \_\_\_\_\_  
Phone (Cell): \_\_\_\_\_ Email: \_\_\_\_\_  
Emergency Contact & Number: \_\_\_\_\_

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<b>Program:</b> Swim Lessons	<b>Session:</b> July 8 <sup>th</sup> - 11 <sup>th</sup> & July 15 <sup>th</sup> - 18 <sup>th</sup>
<b>Days:</b> Monday - Thursday	<b>Time:</b> 30 minute session between 6:30 pm - 8:00 pm
<b>Cost:</b> \$20 for Members and \$30 for Non-Members	
<b>Make Checks Payable to:</b> Village of Jordan <u>OR</u>	<b>Pay by credit/debit card</b>
<b>Mail to:</b> Village of Jordan Swim Lessons	<b>At the:</b> Village Office
P.O. Box 561	7 Mechanic St., Jordan
Jordan, NY 13080	between the hours of 8:30 am - 4:30 pm

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*I hereby give my/our approval of his/her participation in the Jordan Learn to Swim Program at the Jordan Pool. I do hereby waive, release, absolve, indemnify and agree to hold harmless the Jordan Community Council, the Town of Elbridge, the Village of Jordan, the Village of Elbridge, the Jordan-Elbridge School District, and the organizers or supervisors for any claim arising out of injury, except to the extent and amount of coverage provided by liability insurance. YES: \_\_\_\_\_ NO: \_\_\_\_\_*

*In case of accident or injury, 911 will be called by the Lifeguards and the directors will call parents or the emergency contact provided. I authorize any and all medical, dental and/or surgical care and hospitalization advised by the physicians, surgeons or hospital necessary for the proper health and well-being for my child. YES: \_\_\_\_\_ NO: \_\_\_\_\_*

**Parent/Guardian Signature:** \_\_\_\_\_

**Additional Medical Information:** YES: \_\_\_\_\_ NO: \_\_\_\_\_

**\*IF YES, please attach information regarding medical problem(s)**

I would like to volunteer with the Learn to Swim Program as a playground attendant \_\_\_\_\_ or supervising children on the pool deck \_\_\_\_\_.



### Swim Lesson Skills Assessment 2019

Swimmer's Name: \_\_\_\_\_

Skill:	YES	NO	Comments:
Puts face in the water comfortably?			
Submerge entire head underwater?			
Able to blow bubbles?			
Able to float on front independently?			
Able to float on back independently?			
Able to swim independently on front?			
Able to swim front crawl?			
Able to do the Doggy Paddle?			
Able to swim underwater?			
Able to swim independently on back?			
Comfortable in deep water w/o lifejacket?			
Able to swim width of pool (25 yards)?			