

Lake Shore Swim Development Program

Lake Shore Community Education is now offering a swim program to develop and enhance competitive swim skills. This program will be offered throughout the year in four (4) eight-week sessions.

Who: Students in grades 5 – 12 *Swimmers must have basic swim skills and be capable of lap swimming.

When: Monday and Thursday evenings from 6:00 – 8:00 p.m.
Session Three: September 21, 2009 – November 16, 2009.
(Pool follows school calendar.)

Where: High School Pool

With whom: District coaches will provide skill development. Coach involvement may vary per session. This session will be under the direction of Mrs. Zittel.

What this program Is:

- An opportunity to develop, increase and maintain stroke skills and competitive techniques for district swimmers.
- A program to provide year round swimming in an effort to give district swimmers the same opportunity as area district swimmers.
- A relaxed time for swimmers to become familiar with district coaches at all levels.
- An opportunity for 5th and 6th grade swimmers to prepare for competitive swim.

What this program is NOT:

- It is not a learn to swim program. Basic swim skills are expected.
- It is not a swim club. There is no competition associated with this program.

How Much: \$50.00 per session

How to sign up: Fill out the following registration form and return to the Community Education Department. Payment in the amount of \$50.00 will be requested at the time of registration.

Last Name: _____ First Name: _____ Phone: _____

Address: _____ Zip Code: _____

Age of Participant: _____ Grade Level: _____ Parents Name: _____

Emergency Contact: _____ Emergency Phone: _____

Method of Payment: Check/Money Order # _____ Credit Card _____ Cash _____

If paying by check please provide Driver's License # _____

I authorize Lake Shore Central School District to charge my MasterCard/Visa credit card account # and expiration date below, for the above registered classes.

Credit Card Exp. Date _____

Signature _____ Date _____

Check stroke skill:

Free style: ___ Beginner ___ Intermediate ___ Advanced

Back: ___ Beginner ___ Intermediate ___ Advanced

Breast: ___ Beginner ___ Intermediate ___ Advanced

Butterfly: ___ Beginner ___ Intermediate ___ Advanced

LAKE SHORE COMMUNITY EDUCATION WAIVER FORM

I, (Parent Name) _____ acknowledge that my son/daughter _____ do(es) not have any ailments or conditions that could prevent him/her from participating in a physical education activity or class. Accordingly, I hereby consent to and wish my child to participate in the physical education class of the Lake Shore Community Education, and to do so without securing a physician's certificate or examination, which I deem to be unnecessary. I hereby release Lake Shore Community Education from any and all liability and waive any claim for injury that might have been forestalled, foreseen, determined, anticipated or uncovered by a physical examination, and accordingly do agree to hold harmless and indemnify the Lake Shore Community Education for any related costs, expenses or losses (including legal fees) which may be related to any such condition which could or would have been discovered by a physical examination. I also hereby release Lake Shore Community Education from any and all liability for personal property damaged, lost or stolen.

Signature _____ Date _____

Lake Shore Community Education, 959 Beach Rd, Angola, NY 14006

Drop off registrations at the Community Education Office located in the basement of the Senior High School.

Office hours: Monday-Friday 8:30 a.m.—4:30 p.m.

Phone: 926-2270 Fax: 926-2272