



Thank you for your interest in Keystone Swim School. Enclosed please find our registration form and class schedule. We are now accepting registrations for all of our classes.

To register, please complete the Keystone Swim School Registration Form in its entirety, found at the end of this document. Please indicate your schedule preference by circling the days you are requesting lessons and choose the time block that best fits your schedule. Private lessons are also available for an additional charge. The lesson time block and date that you have imputed is a REQUEST, and must be approved by the Swim Director in order to assure that we have an instructor available for the time you are requesting. You will not be charged until you receive a confirmation email from the Swim Director regarding your approved date and time.

In order to determine what class your child should be enrolled in, please refer to our website at www.swimkeystone.com and review the swim levels page, or see the enclosed Keystone Swim School Levels, Prerequisites, and Course Goal sheet. If you need assistance, please feel free to call us at 818-889-2224.



**Keystone Swim School Skill Levels,
Prerequisites and Course Goals**

BABIES

(Typically ages six months to 35 months)

Water Acclimation
Waterbabies
Advanced Waterbabies

Student tolerates submersion
Student has ten second breath control
Student moves three feet through the water

TODDLERS

(Typically ages two and three years)

Aquababies

Recommended age, two years
Student moves 7 feet through the water Student begins work on independent breaths

Aquatots
Prerequisite:
Goal:

Recommended age, three years
None
Student moves 5 feet through the water

Advanced Aquatots
Prerequisite:
Goal:

Recommended age, three years
Moves 5 feet through the water
Student moves 10 feet through the water and begins work on Independent breaths

Super Aquatots
Prerequisite:
Goal:

Recommended age, three years
Moves 10 feet through the water
Student moves 15 feet through the water and begins to get an independent breath

BEGINNERS

(Typically ages four years and up)

Preschool Beginners
Prerequisite:
Goal:

Recommended age four and five years old
None
Student swims 5 feet

Beginners
Prerequisite:
Goal:

Recommended age six years and up
None
Student swims 10 feet and begins to get an independent breath

ADVANCED COURSES

(Often takes two or more attempts to pass the Advanced Courses)

Advanced Beginners I
Prerequisite:
Goal:

Four years and up
Swims 5 feet
Student swims 20 feet and begins to get one independent breath

Advanced Beginners II
Prerequisite:
Goal:

Four years and up
Swims 20 feet (width of the pool)
Student swims 20 feet and gets one independent breath

Intermediate Swimmer
Prerequisite:
Goal:

Five years and up
Swims 20 feet (width of the pool) and get a breath
Student swims 40 feet and gets several front breaths

Advanced Intermediates
Prerequisites:
Goal:

Six years and up
Swims 40 feet and gets several breaths
Student swims freestyle with rolling breath and elementary backstroke 2 lengths of the pool



Advanced Swimmers

Prerequisite:

Goal:

Seven years and up

Freestyle with rolling breaths and elementary backstroke 2 lengths of the pool

Student swims freestyle with rhythmic breathing and breaststroke 2 lengths of the pool

Super Swimmers

Prerequisite:

Goal:

Eight years and up

Swims freestyle with rhythmic breathing and breaststroke 2 lengths of the pool

Student swims competitive backstroke and butterfly 2 lengths Of the pool

Pre Team

Prerequisite:

Goal:

Eight years and up

Swims competitive backstroke and butterfly 2 lengths of the pool

Mastery of all four competitive strokes 2 lengths of the pool. Introduction of safety and snorkeling skills



Summer Registration Form 2017

Parent 1 Name: _____ Email Address: _____

Parent 2 Name: _____ Email Address: _____

Child's Name: _____ Date of Birth: _____ Age: _____ Sex: _____

Child's Name: _____ Date of Birth: _____ Age: _____ Sex: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Parent 1 Cell: _____ Parent 1 Work: _____

Parent 2 Cell: _____ Parent 2 Work: _____

Where did you hear about us? Internet Friend Camp Keystone Other _____

Emergency Contact Name _____ Phone _____

Lessons run for 9 weeks, from **June 19 - August 18, 2017**. Each lesson lasts 30 minutes.

Rates: **30 min.** small group lessons **\$17.50/lesson**.

Rates: **30 min.** private lessons **\$22.50/lesson**

Child 1:

Circle the desired lesson days

Child 2:

Circle the desired lesson days

Mon	Tue	Wed	Thurs	Fri
June 19	June 20	June 21	June 22	Make-Up
June 26	June 27	June 28	June 29	Make-Up
July 3	July 4 CLOSED	July 5	July 6	No PM Lessons
July 10	July 11	July 12	July 13	Make-Up
July 17	July 18	July 19	July 20	No PM Lessons
July 24	July 25	July 26	July 27	Make-Up
July 31	Aug 1	Aug 2	Aug 3	No PM Lessons
Aug 7	Aug 8	Aug 9	Aug 10	Make-Up
Aug 14	Aug 15	Aug 16	Aug 17	Make-Up

Choose 1 Time Slot:

8:15 - 8:45am _____

3:30 - 4:00pm _____

4:00 - 4:30pm _____

Mon	Tue	Wed	Thurs	Fri
June 19	June 20	June 21	June 22	Make-Up
June 26	June 27	June 28	June 29	Make-Up
July 3	July 4 CLOSED	July 5	July 6	No PM Lessons
July 10	July 11	July 12	July 13	Make-Up
July 17	July 18	July 19	July 20	No PM Lessons
July 24	July 25	July 26	July 27	Make-Up
July 31	Aug 1	Aug 2	Aug 3	No PM Lessons
Aug 7	Aug 8	Aug 9	Aug 10	Make-Up
Aug 14	Aug 15	Aug 16	Aug 17	Make-Up

Choose 1 Time Slot:

8:15 - 8:45am _____

3:30 - 4:00pm _____

4:00 - 4:30pm _____

Of Lessons _____ x \$17.50/\$22.50 = \$ _____

Of Lessons _____ x \$17.50/\$22.50 = \$ _____

Child 1: _____

Swim Level (See website for breakdown): _____ Years in KSS _____

Does your child have asthma, *allergies or any other medical condition that could be adversely affected by exercise or swimming, If yes, please explain: _____

Child 2: _____

Swim Level (See website for breakdown): _____ Years in KSS _____

Does your child have asthma, *allergies or any other medical condition that could be adversely affected by exercise or swimming, If yes, please explain: _____

***KSS rewards children with M&M's chocolate candies or Skittles.**



KEYSTONE SWIM SCHOOL POLICIES

1. I understand and agree that swim lessons should never replace adult supervision.
2. If my child comes under a physician's care during the course of instruction at Keystone Swim School, I understand and agree that it is my responsibility to notify the office before the start of class.
3. I understand that if my child is under a physician's care while in swim lessons, I must provide Keystone Swim School with a Doctor's Release note permitting my child to participate in lessons.
4. I understand that due to operational costs, tuition for swim lessons is non-refundable. In case of medical emergencies, credit for future lessons will be extended to customers.
5. If my child is a **No Show** for a swim lesson, my fees for the lesson will be forfeited.
6. The office must be notified 30min. prior to lesson of an absence otherwise your make-up lesson will be forfeited. **Make-up days are not guaranteed and are subject to space availability.** After 2 make-up days, a \$10 change fee will be charged to schedule additional make up days. I understand that there is no guarantee that the make-up instructor will be the same as my child's regular instructor.
7. **If your child does not attend camp the day of their lesson, and you are driving your child to lessons that day, you will forfeit your lesson if you show up more than 10 minutes late to your 30 minute appointment.**
8. On the rare occasion that lessons may be cancelled due to inclement weather, holidays, or other unforeseeable circumstances, I will be able to reschedule the lesson(s) without any additional fees.
9. I understand that while Camp Keystone is in session, lesson times may need to be altered due to the availability of the pool.
10. I agree that while I have a child under the age of three years attending swim lessons at Keystone Swim School, they must wear a washable Health Department approved swim diaper.
11. I understand that my child(ren) is not enrolled until a Registration Form is completed and tuition is paid in full. All tuition must be paid prior to the beginning of each session. There will be a \$35.00 fee charged for each returned check from the bank.
12. I agree to pay a \$15.00 non-refundable registration fee for the first child, \$10.00 for the second child, and \$5.00 for the third child, renewable each January.
13. I agree to assume all liability for my child(ren) and myself without regard to fault while at Keystone Swim School. I further agree to hold harmless Keystone Swim School and The Keystone Group, Inc. or any of the employees for any complications or injury that may result from my child(ren) or myself attending Keystone Swim School.
14. I allow my child's image to be used in any and all promotional photographs, videos, or websites.

I hereby certify that the information on the reverse side of this form is accurate, and that I have read and understand the Keystone Swim School Policies listed above.

After June 1 there are absolutely NO REFUNDS -NO EXCEPTIONS. _____ Initial Here

Parent/Guardian Signature _____ Printed Name _____ Date _____

FOR OFFICE USE ONLY					
Funds received:					
1st Payment: Check _____ / _____ Cash _____ Credit Card _____ Exp _____					
amount	check #		credit card #	date	
2nd Payment: Check _____ / _____ Cash _____ Credit Card _____ Exp _____					
amount	check #		credit card #	date	
3rd Payment: Check _____ / _____ Cash _____ Credit Card _____ Exp _____					
amount	check #		credit card #	date	
Session	Day	Time	Level	Child's Name	