



OAK "I Can Swim" Summer Program 2012
Appleby College Pool – OAK 905 842-0903
(540 Lakeshore Road West)

SESSION 5:

Week 1: Tuesday to Friday, 3 to 6th July
Week 2: Monday to Thursday, 9 to 12th July

Option A: 4:30 to 5:30 pm

Option B: 5:30 to 6:30 pm *

Option C: 6:30 to 7:30 pm

SESSION 6:

Week 1: Monday to Thursday, 16 to 19th July
Week 2: Monday to Thursday, 23 to 26th July

Option A: 4:30 to 5:30 pm

Option B: 5:30 to 6:30 pm *

Option C: 6:30 to 7:30 pm

SESSION 7:

Week 1: Monday to Thursday, 30 July to 2nd August
Week 2: Tuesday to Friday, 7 to 10th August

Option A: 4:30 to 5:30 pm

Option B: 5:30 to 6:30 pm *

Option C: 6:30 to 7:30 pm

SESSION 8:

Week 1: Monday to Thursday, 13 to 16th August
Week 2: Monday to Thursday, 20 to 23rd August

Option A: 4:30 to 5:30 pm

Option B: 5:30 to 6:30 pm *

Option C: 6:30 to 7:30 pm

*Open to OAK Entry swimmers

Summer 2012

To help streamline the registration process, families have the option to register for the full summer season (July and August 2012). This will help to ensure that you have the session and time that best suits your schedule for the summer season.

Families can pay with one cheque or with postdated cheques (see below for dates). ALL cheques MUST accompany signed registration form.

Please note that only sessions eight lessons and over OR two consecutive sessions qualify for the fitness tax credit. You will need to determine precise qualifications at time of filing. Receipts will be distributed during the second to last class of each session.

We regret that we are unable to accommodate "make up" class requests as we strictly adhere to maximum class sizes.

Postdated cheques, made out to "Oakville Aquatic Club", should be dated as follows:

Session 5:	June 1, 2012
Session 6:	June 15, 2012
Session 7:	July 1, 2012
Session 8:	July 15, 2012

All sessions have eight lessons. The fee is \$200



The Sears I Can Swim program, designed by Swim Canada, focuses on teaching skills for achieving personal excellence in swimming.

I Can Swim teaches children the fundamental skills of pre competitive swimming as well as water safety. ICS emphasizes individual swimming progression and stroke refinement, rather than using a traditional pass/fail approach. The skills acquired allow for an easy transition to all aquatic sports.

Emphasis is on the individual learner's needs, with a maximum of five students per instructor. Certified instructors use continuous encouragement and positive feedback to teach freestyle, breaststroke, backstroke, butterfly, dives and flip turns.

The hour-long lesson means more time spent swimming and improvements in your child's skills, endurance, speed and fitness level. The program centres the learning around promotion of self-esteem and confidence building.

Location of Lessons:
Appleby College Pool, 540 Lakeshore Road West
(at 4th Line & Lakeshore Road)

All stages are offered at each time option.

Registration Form

SWIMMER

First Name _____ Last Name _____
 Date of Birth (dd/mm/yy) _____ Age: _____
 Level: _____ M F
 Doctor's Name & # _____
 Medication Yes No If yes _____ Allergies Yes No If yes _____
 Alternate Emergency Person _____
 Phone No. for Alt. Emerg. Person _____

FAMILY INFORMATION

Last Name _____ Parent's First Name _____
 Address _____ City _____
 Postal Code _____ Tel. No. (H) _____ Tel. No. (C) _____
 Email _____

Please complete email address – it will be used for confirmation

TO KEEP US INFORMED: where did you hear of our Swim Club? _____

	Opt. A 4:30 PM	Opt. B 5:30 PM	Opt. C 6:30 PM	CHQ #	FEE	ACCT'D
Session 5:	\$200	\$200	\$200			
Session 6:	\$200	\$200	\$200			
Session 7:	\$200	\$200	\$200			
Session 8:	\$200	\$200	\$200			
				Total:		

CONSENT

The swimmers will be supervised and all reasonable safety precautions will be stressed. However, I hereby authorize the coaches, in the event of an emergency, to obtain the medical services as required so that he/she may undergo any necessary treatment. In all cases, attempts will be made to contact parents. It is the responsibility of the parent/guardian of each swimmer to have their child checked by their physician to ensure he/she is physically capable of participating in training and to notify the Club of any health problems that may affect his/her participation in Club activities.

INDEMNITY AND AUTHORIZATION

In consideration of the OAKVILLE AQUATIC CLUB specified in this form permitting my/our child to participate in the Club, we hereby promise to indemnify and save harmless the OAKVILLE AQUATIC CLUB, its employees and its members from and against all claims, demands, actions, and proceeding, by whomever made or brought, in respect of any costs, expenses, loss, damage, or injury, including death arising by reason of or in connection with my/our child(s) participation in the said activities and hereby release and forever discharge the OAKVILLE AQUATIC CLUB, its employees and members from and against all claims or demands whatsoever which we, our child, our or his/her heirs, executors, administrators or assigns, can share or may have reason of the provision of medical care to me/him/her.

Signature Parent/Guardian _____ Date _____

Forms and cheques can be mailed to the P.O. Box address or dropped off at the OAK office located in the
 Iroquois Ridge Recreation Centre (1051 Glenashton Drive).

Signed registration form MUST accompany payment.

**Refund requests received within two weeks of the session start date are subject to a \$25 withdrawal fee.
 No refunds once session has started.**

If you have any questions, please call the OAK Office at 905 842 0903 or email oak@bellnet.ca
 Additional registration forms can be downloaded from the website at www.oakvilleaquatics.ca



✕ Summer 2012 learn to swim programs



Oakville Aquatic Club is proud to offer the nationally recognized Sears I Can Swim program. ICS is an innovative swim program, designed by Swimming/Natation Canada, for children ages 4 and up.

www.oakvilleaquatics.ca