



East Rochester School District

Saturday Morning

Learn-to-Swim Program

American Red Cross Swim Lessons
at the East Rochester School District Indoor Pool

Saturday Morning Learn-to-Swim

Certified instructors will guide your swimmer through one of the six levels of American Red Cross swimming. Classes are progressive, working on the student's swimming technique while improving endurance.



Level 1: Water exploration (11:45 am - 12:15 pm)

Students will learn to feel comfortable in the water and enjoy the water safely

Level 2: Primary skills (11:15 - 11:45 am)

Students will learn to float with support and level off in a vertical position

Level 3: Stroke readiness (10:30 - 11:15 am)

Students will learn the front and back crawl, and become familiar with the elementary backstroke and treading

Level 4: Stroke development (9:45 - 10:30 am)

Students will further work on the basic strokes, and be introduced to the breaststroke and sidestroke

Level 5: Stroke refinement (9 - 9:45 am)

Students will refine their breaststroke and sidestroke, gain endurance, and start to learn turns

Level 6: Skill proficiency (9 - 9:45 am)

Students will polish up their strokes, and learn to swim more smoothly and over greater distances

**LESSONS SATURDAY, FEB. 27 - SATURDAY, MARCH 27
(FIVE SESSIONS)**

SWIM LESSON REGISTRATION

~ ~ All forms must be mailed to, or dropped off at, the ER Athletic Office ~ ~

Parent/guardian name _____
Street address _____
City/state/zip _____
Phone #s home _____ work _____ cell _____
Emergency contact _____ Phone #s _____

**LESSONS SATURDAY, FEB. 27 - SATURDAY, MARCH 27 (five sessions):
\$27 per student**

Name of swimmer	Level
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total (# students x \$27) = _____

Please make checks payable
to 'East Rochester Schools'

I hereby grant permission to the above named to participate in the ER School District's Saturday Morning Learn-to-Swim Program. I assume all risks of damages to my child while participating in any of these aquatic activities sponsored by the school district, and its agents, servants, and employees from any claim of any nature, arising out of participation in these activities. It's my understanding that my child will be subject to the rules and regulations of the program. I understand that if a medical emergency arises, I will be notified. If I cannot be reached by telephone, I authorize medical treatment that a competent medical professional deems necessary.

Signature _____ Date _____

ER East Rochester Saturday Morning Learn-to-Swim Program

Non-profit organization
U.S. postage
PAID
East Rochester, N.Y.
Permit no. 25

222 Woodbine Ave., East Rochester, N.Y. 14445

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