

# MINER SWIMMING LESSONS

We will teach swimming lessons for those who are at least four (4) years or older.

We are offering 10 (30 minute) lessons Mon-Fri over two weeks  
Session preference will be a first come-first serve basis.

## June 3-14, 2013

Session 1	10:45 – 11:15 am
Session 2	11:15 – 11:45 am
Session 3	11:45 – 12:15 pm
Session 4	5:00 – 5:30 pm
Session 5	5:30 – 6:00 pm

## June 17-28, 2013

Session 1	10:45 – 11:15 am
Session 2	11:15 – 11:45 am
Session 3	11:45 – 12:15 pm

Lessons will take place at the S&T Pool in the Gale Bullman Multi-Purpose Building.

Parents/Guardians are not allowed to remain on the swimming pool deck during lessons. There is a spectator viewing area in the balcony of the swimming pool area.

**A fee of \$80, along with your application will secure your spot.**

Checks should be made payable to: Missouri S&T Swimming Lessons

For more information, email Coach Grooms @ [dougg@mst.edu](mailto:dougg@mst.edu)

**THANK YOU FOR YOUR SUPPORT!**

Please tear off this section and return with payment to  
Missouri University of Science and Technology  
S&T Swimming Lessons  
G2 Gale Bullman Building  
Rolla, MO 65401

Name: \_\_\_\_\_

Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate phone: \_\_\_\_\_

email: \_\_\_\_\_

Have you ever taken swim lessons before?                      Y                      N  
If yes, what level of achievement \_\_\_\_\_

## MEDICAL & INSURANCE INFORMATION:

*Special Accommodations: Please note any medical conditions that our staff should be aware of for this swimmer: (attach an additional sheet if necessary) Insurance is required for all participants.*

Medical insurance company \_\_\_\_\_

Policy Number \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone(s) \_\_\_\_\_

*In consideration of enrollment in the 2013 Missouri S&T Miners Swimming Lessons, I hereby release the Curators of the University of Missouri, its employees and representatives from any liability for injuries sustained by my child while participating in such program. The release shall apply to any acts or omissions on the part of the University and its representatives and to any acts or omissions of other participants. In the event of an emergency, I give consent for Missouri S&T to obtain from a physician or hospital such medical care as is reasonably necessary for the welfare of my child.*

Signature \_\_\_\_\_

Parent's Signature \_\_\_\_\_