

Thank you for requesting **PRIVATE SWIM LESSONS** at the **C.W. Avery Family YMCA**



Please review the following policies before returning your private lesson request form.
If you have any questions, please contact Danielle Krohn, Aquatics Manager, at 815-267-8600 x225
or by email at dkrohn@jolietyymca.org

1. One session of private swimming lessons includes 5 half-hour lessons. The Spring 1 session is 6 weeks long, allowing for 5 lessons, plus 1 make-up week to be used as needed. The Spring 1 session of private lessons runs from Monday, February 27th to Saturday, April 7th.
2. Cancellations made by the participant with more than 24 hours notice, or with a doctor's note, will be made up by the instructor using the makeup week at the end of the session. No more than 2 lessons can be made up in a session. Cancellations made with less than 24 hours notice and without a doctor's note will not be made up.
3. If an instructor cancels a lesson, the member will be offered either a substitute instructor or an alternate time, whichever is more convenient for the member. Lessons cancelled by the Y will be rescheduled at the earliest possible date.
4. *For semi-private lessons only: Both participants must attend all classes. Classes missed by one participant will not be made up.*
5. Regardless of arrival time, lessons will end at the scheduled time.
6. For your child's safety and to avoid distractions we ask that you observe your lessons from our pool observation room or from the white bins along the walls in the family pool.

I have read and understood the above information. By signing below I am agreeing to abide by and follow all of the YMCA's rules, policies and procedures.

Participant Signature (or Parent if Participant is a minor)

Date

**LOVE YOUR FAVORITE SWIM INSTRUCTOR?
Have them host your birthday party at the Y!**

**Did you know you could request your favorite swim instructor or lifeguard to be your party host?
Simply request their name when booking to find out if they are available on your special day!**

Contact Danielle Krohn, Aquatics Manager, at 815-267-8600 x228
or email dkrohn@jolietyymca.org to book today!



STUDENT NAME: _____

PARENT NAME: _____

HOME PHONE: _____

CELL PHONE: _____

STUDENT AGE: _____

MEMBER TYPE: FULL PROGRAM AWAY

SKILL LEVEL OF STUDENT: (If student has participated in our swim program before, please list the class level)

GOAL OF STUDENT: _____

INSTRUCTOR PREFERENCE (If any): M F **SPECIFIC INSTRUCTOR:** _____

Please mark all the days & times you would be available for private lessons. Also note if you have a first choice for day and/or time. Scheduling is based on the availability of our instructors and wait list priority. We will, however, strive to meet your availability.

Monday

| | | | | | | | |
|-----------|-----------|-------------|------------|-----------|-----------|-----------|-----------|
| 8:40-9:10 | 9:20-9:50 | 12:00-12:30 | 12:40-1:10 | 2:35-3:05 | 3:15-3:45 | 7:10-7:40 | 7:45-8:15 |
| | | | | | | | |

Tuesday

| | | | | | |
|-----------|-----------|-------------|------------|-----------|-----------|
| 8:40-9:10 | 9:20-9:50 | 12:00-12:30 | 12:40-1:10 | 2:35-3:05 | 3:15-3:45 |
| | | | | | |

Wednesday

| | | | | | | | |
|-----------|-----------|-------------|------------|-----------|-----------|-----------|-----------|
| 8:40-9:10 | 9:20-9:50 | 12:00-12:30 | 12:40-1:10 | 2:35-3:05 | 3:15-3:45 | 7:10-7:40 | 7:45-8:15 |
| | | | | | | | |

Thursday

| | | | | | |
|-----------|-----------|-------------|------------|-----------|-----------|
| 8:40-9:10 | 9:20-9:50 | 12:00-12:30 | 12:40-1:10 | 2:35-3:05 | 3:15-3:45 |
| | | | | | |

Friday

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|--|
| Write in any times you are available from 5AM - 8:30PM |
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Saturday

| | | | | | | | |
|-------------|------------|-----------|-----------|-----------|-----------|-----------|-----------|
| 12:00-12:30 | 12:40-1:10 | 1:20-1:50 | 2:00-2:30 | 2:40-3:10 | 3:20-3:50 | 4:00-4:30 | 4:40-5:10 |
| | | | | | | | |

Sunday

| | | | | | |
|-------------|-------------|-------------|-----------|-----------|-----------|
| 11:00-11:30 | 11:40-12:10 | 12:20-12:50 | 1:00-1:30 | 1:40-2:10 | 2:15-2:45 |
| | | | | | |

Please rank the following in order of importance to you from 1st (most) through 4th (least), or by using an X to signify that a category is not important to you:

Day _____ **Time** _____ **Specific Instructor** _____ **Instructor Gender** _____