

# 2010 FALL PIRANHA SWIM LESSONS AND STROKE SCHOOL

[www.swimppst.org](http://www.swimppst.org)

Piranha Swim Lessons are a learn to swim program developed to help children become comfortable in the water; and with practice and commitment these children will learn the skills to enjoy a variety of aquatic activities. The children will be evaluated and placed in groups based on their current ability level. Progression will be determined by the Lesson Coordinator as the swimmers develop their abilities and comfort level in the water. All children learn at different speeds and have their own fears when it comes to being in the water. Skills will range from water introduction, body balance in the water, kicking skills, to full stroke progression. Each group will focus on a set of skills which will build into the next group level. Swimmers will repeat and practice their skills for their instructors and the lesson coordinator. The lesson coordinator will advance the swimmers once they feel the swimmer is ready for the next step. It is our goal to have movement through the different groups to keep your swimmers learning and having fun.

Piranha Stroke School is an extension of the lesson program. Stroke School is designed to help keep our young swimmers in the water who are not ready for the team or are not interested in the competitive team. This group will break down the strokes through drills and increase endurance through small sets of swimming. It will work on starts and turns for all of the competitive strokes.

**Dates:** September 13<sup>th</sup> -November 3<sup>rd</sup> (8 weeks)

Lessons: (Monday and Wednesday)

Session 1: 4:00-4:30 pm      Session 2: 4:30-5:00pm

Stroke School: (Monday and Wednesday)

Session A: 4:00-5:00 pm

Lessons and Stoke School will meet on the following days:

Sept: 13,15,20,22,27,29 Oct: 4,6,11,13,18,20,25,27 Nov: 1,3

**Location:** JW Middle School Pool, Princeton NJ

**Cost:** Lessons: \$240.00 per child (16 Lessons)

Stroke School: \$240.00 per child

Payment must be received before the start of lessons. Swimmers will not be put in a group without full payment.

**How to sign up:** Each participant must attend an evaluation session to determine which class would best fit the swimmer before the start of lessons. This will allow the swimmers to begin learning the first day with minimal movement of groups. Group sessions will be set up based on pool availability and group sizes to provide each swimmer with the best opportunity to learn. Please be aware your child may move into the other session upon skill progression.

**\*\*If you participated in our programs previously- you do not need to be evaluated- your certificate gave you the group you were in for your next set of lessons- write that group on the registration form. \*\***

Please check the website for evaluation dates. [www.swimppst.org](http://www.swimppst.org)

While at the evaluation, the following paperwork must be filled out and returned with a check for the total amount due: registration form and release form.

Questions should be directed to Kip Hein ([khein@swimppst.org](mailto:khein@swimppst.org)) or Julie Meirs ([jmeirs@swimppst.org](mailto:jmeirs@swimppst.org)) or (609) 371-2065

#### Lesson and Stroke School Particulars:

- All classes are 25 minutes long for lessons and 55 minutes for Stroke School
- The swimmer to instructor ratio will be kept low to ensure individual attention
- Children must be able to listen and wait their turn
- Parents are to bring their swimmer to the door 5 minutes before the class starts with a towel
- Parents need to wait in the hallway or observe from the window upstairs. **Parents are not permitted on deck during the lesson.**
- Swimmers should wear one piece bathing suits without pockets. Hair tied back or in a cap is highly recommended for the girls and boys with long hair during lessons.
- Swimmers may use goggles once they are recommended for Lessons.
- Stroke School swimmers must wear goggles and a cap for anyone with hair below their ears
- The pool water is kept at a constant 80 degrees.
- Every swimmer should have big ears and big smiles and be ready to learn.
- **Please have your swimmers try to go to the bathroom BEFORE coming in for their lesson.**

### **Miss A Class?**

Due to pool availability and the complexity of scheduling, there will be no make ups or refunds for a missed lesson for ANY reason.

### **Weather Cancellations**

The Lesson Coordinator may have to cancel lessons for weather related reasons. All classes cancelled by us will be rescheduled. Please check the website [www.swimppst.org](http://www.swimppst.org) or call 609-371-2065.

## **General Overview of Lesson Levels**

**Yellow Piranha**: Water safety, Water introduction, going under water, air bubbles and basic floating technique

**Orange Piranha**: Water safety, floating on front and back without help, basic kicking, intro to streamline position

**Blue Piranha**: Safety rules, kicking skills, streamline kicking, breath control

**Green Piranha**: Safety rules, freestyle and backstroke skills, advanced kicking, intro of breaststroke

**Purple Piranha**: Safety rules, advanced freestyle and backstroke swimming, diving, intro to flip turns, breaststroke swimming, butterfly kicking (Eligible for placement in Stroke School)

**Gold Piranha**: Pool rules, endurance freestyle and backstroke swimming, advanced breaststroke and butterfly swimming and flip turns (Eligible for placement in Stroke School)

**Stroke School**: Refine starts and turns for all competitive strokes, increase endurance and put all the strokes together.

# WAIVER/RELEASE OF LIABILITY

*PLEASE READ CAREFULLY BEFORE SIGNING.*

*THIS IS A RELEASE OF LIABILITY AND WAIVER OF CERTAIN LEGAL RIGHTS.*

I, \_\_\_\_\_, the parent/guardian of the participant agree and understand that swimming is a HAZARDOUS activity. I recognize that there are risks inherent in the sport of swimming, including but not limited to ear and eye infection, colds, abrasions, cuts, nosebleeds, burns, stings, rashes, head injuries, injured or broken limbs, paralyzing injuries and death.

The participant hereby agrees to participate in the Princeton Piranhas Swim Team, lesson program or stroke school and hereby agrees to indemnify and hold harmless Princeton Piranhas Swim Team, its coaches, instructors, officers, directors, agents, owners and employees against any liability resulting from any injury that may occur to the participant while participating in the swim team, lesson program or stroke school. The participant also agrees to indemnify Princeton Piranhas Swim Team for any damages incurred arising from any claims, demand, action or cause of action by the participant.

The participant authorizes any representative of Princeton Piranhas Swim Team to have the participant treated in any medical emergency during their participation in the swim team, lesson program or stroke school. Further, the participant and/or parent/guardian agrees to pay all costs associated with medical care and transportation for the participant.

I have noted on the registration form any medical/health problems of which the staff should be aware.

**I HAVE CAREFULLY READ THE ABOVE LIABILITY RELEASE AND SIGN IT WITH FULL KNOWLEDGE OF ITS CONTENTS AND SIGNIFICANCE.**

**Participant's name(s): (please print)**

\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

(Parent/Guardian)

## MEDICAL INFORMATION

Swimmer's Name

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Parent's Names:

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Home Phone: \_\_\_\_\_ Parent's Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

1. In the space provided below, list any pertinent health or medical information and instructions or special issues we should be aware of (allergies, tetanus booster dates, drug allergies, asthma, prescriptions, ADHD etc.)

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2. Aside from yourselves, (the parents of the Swimmer), please indicate (in order), those individuals that you would like the coaches to contact with phone numbers, should there be an emergency involving your child:

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3. Swimmer's Doctor: \_\_\_\_\_ Phone \_\_\_\_\_

**\*\*This must accompany the waiver form.**

# **2010 Fall Lesson and Stroke School Registration Form**

\*\* PLEASE PRINT CLEARLY

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

Parent 1: \_\_\_\_\_  
Name Email Cell Number

Parent 2: \_\_\_\_\_  
Name Email Cell Number

Home Address: \_\_\_\_\_  
Street Address  
\_\_\_\_\_  
City State Zip

Home Phone: \_\_\_\_\_

## ***Swimmer's Information:***

**1** \_\_\_\_\_  
Name Age Date of Birth Sex Group Session  
*Any medical conditions or other information we should be aware of:*  
\_\_\_\_\_

**2** \_\_\_\_\_  
Name Age Date of Birth Sex Group Session  
*Any medical conditions or other information we should be aware of:*  
\_\_\_\_\_

**3** \_\_\_\_\_  
Name Age Date of Birth Sex Group Session  
*Any medical conditions or other information we should be aware of:*  
\_\_\_\_\_

Emergency Contact Information: \_\_\_\_\_  
Name Number Relationship

**This form, waiver and payment need to be mailed to:** Princeton Piranhas Swim Team, Attention Lessons

1156 Old York Rd. Hightstown, NJ 08520. Please make checks payable to Princeton Piranhas Swim Team.

Swimmers will not be put in groups until payment and paperwork are received.