

# St Olaf Lake Swimming Lessons

Red Cross lessons will be offered at St. Olaf Lake Park this summer. Students should be registered into classes based on prior year's level. Child must have passed previous level to continue on to the next level. New students should register based on ability, however they will be evaluated to assure proper placement. **Classes are Monday through Friday for 2 weeks. The Short Session is for 1 week with hour long lessons.**

## Swim Classes

SESSION	DATES	LEVEL	TIMES
1	June 13-17 (short session)	5	2:15pm-3:15pm
		6	3:30pm-4:30pm
2	June 20-July 1	1	12:00pm -12:30pm
		2	12:40pm - 1:10pm
		3	1:20pm – 1:50pm
		4	2:00pm – 2:30pm
		5	2:40pm – 3:10pm
3	July 11-22	6*	3:20pm – 3:50pm
		1	12:00pm -12:30pm
		2	12:40pm - 1:10pm
		3	1:20pm – 1:50pm
4	July 25-Aug 5	4	2:00pm – 2:30pm
		5	2:40pm – 3:10pm
		6*	3:20pm – 3:50pm
		1	4:30pm – 5:00pm
		2	5:10pm - 5:40pm
		3	5:50pm – 6:20pm
		4	6:30pm – 7:00pm

\*Level 6 is subject to change based on student demand. Please indicate on your registration which session you are interested in. If enough demand we will hold in 3 sessions.

**Classes are limited to the first 10-12 students to register. Schedule will be emailed the first week of June. Assume you have the class you registered for unless otherwise notified.**

**Due to the limited class sizes and since there is no guarantee of passing, please register for ONE class per summer per child. If your child passes and there is room in the next session then you can then inquire about joining the next session.**

**Level 1 – Introduction to Water Skills (Must be 4 years old to begin lessons)**

**Level 2 – Fundamental Aquatic Skills**

**Level 3 – Stroke Development**

**Level 4 – Stroke Improvement**

**Level 5 – Stroke Refinement**

**Level 6 – Swimming and Skill Proficiency**

# St Olaf Lake - Swim Lesson Registration Form 2016

Name (Parent/Guardian)

Phone

Address

City/Zip

E-Mail Address (Preferred for sending schedule)

## Program Cost - \$30.00 per participant – No refund unless class is cancelled

Registrant's Name	Session	Level	Date of Birth	Age	Fee
Example: John Smith	1	4	1/1/02	10	\$30.00

**Classes are limited to the first 10-12 students to register.**

**Total:**

**Enclose fee with registration form and return to NRHEG School Office by May 27, 2016.**

Or Mail to: City of New Richland

PO Box 57

**(Make Checks Payable to City of New Richland)**

New Richland, MN 56072

Payment may also be made online by visiting [www.cityofnewrichlandmn.com](http://www.cityofnewrichlandmn.com). Click on Parks and Rec and follow the link for Summer Rec. **(A copy of payment receipt must accompany this form.)** Questions can be directed to Sara Jo at (507)465-3514.

**Office Use Only:** Date: \_\_\_\_\_ Time: \_\_\_\_\_ Paid:  Cash  Check# \_\_\_\_\_

Online – Receipt Attached