

JUST ADD WATER! GENEVA FAMILY YMCA

PRIVATE AND SEMI-PRIVATE SWIM LESSON REQUEST FORM

The Geneva Family YMCA offers multiple options in swim lessons that will help participants start swimming at the desired level. Our certified, patient and knowledgeable Y swim instructors offer Private and Semi-Private lessons for ages 3 and up. Private lessons are done on a one on one basis. Semi-Private lessons are a maximum of 2 people.

LESSON PACKAGE SELECTION

Private

# of Lessons	Class Duration	Members	Non-Members	
1 Class	30 Minutes	\$25.00	\$35.00	
4 Classes	30 Minutes	\$80.00	\$120.00	

Semi-Private

2 swimmers of equal Levels

# of Lessons	Class Duration	Members	Non-Members	
1 Class	30 Minutes	\$15.00/Per Swimmer	\$30.00/Per Swimmer	
4 Classes	30 Minutes	\$50.00/Per Swimmer	\$100.00/Per Swimmer	

Geneva Family YMCA

399 William St. Geneva, NY 14456 315-789-1616



www.GenevaFamilyYmca.org

PRIVATE AND SEMI-PRIVATE SWIM LESSON REQUEST FORM

1. What is the swimmers swimming experience and current ability?

2. What do you hope to focus on and/c	or improve	e throug	h Private Swin	n Lessons?		
3. Which of the following days and time	es work b	est for y	our swimmer?) (Please ci	rcle time and day	')
8:30 am – 9:00 am Mo	on. Tues	Wed.	Thurs.			
9:00 am – 9:30 am Mo	on. Tues	Wed.	Thurs.			
4:15 pm – 4:45 pm We	d.					
Other (per instructor availability	cannot gı	uarantee	·)			
-Nin - Nin - Nin - 7	no-	Noin	-Min-	nin	-Min -M	no - Din
NAME:	a. ¹⁰ 11 a.	/	" in" and m			
Last				First		
ADDRESS:					/	
					Zip	
PHONE:	SEX:	M / F	Current Gra	de:	Age:	
Parent E-Mail Address:						
HEALTH INFORMATION						
Does your child take any medication?	No	Yes		Please S	pecify:	
Do your child have any allergies?	No	Yes		Please S	pecify:	
Do you child have any disabilities/medical issues/inj		injuries?	No Yes	Please S	pecify:	
EMERGENCY INFORMATION						
Emergency Contact:				Phone #_		
Relationshin:						

WAIVER: I hereby certify that my child is in normal health and capable of safely participating in the Sport or Event named above. I understand that this activity is potentially dangerous and can result in injury, even under normal circumstances. My child is physically able to participate in the activity named above. I hold harmless the Geneva Family YMCA, any officer, volunteer or employee of, and all involved with participation in the above mentioned sport or activity. In the event that I am not able to make arrangements for emergency medical attention at the time of a illness or accident, I hereby authorize the Geneva Family YMCA to transport my child to the nearest medical facility for treatment deemed necessary.