

Learn to Swim Program

Application Form

Application Date

Student 1					
Course Name		Time Offered			
Student's Name			Date of Birth		
List any Medical Concerns					
Previous Swimming Experience (Swim Center, Arlington Echo, etc.)					
Student 2	Check	if additional s	tudents are listed on	the back	
Course Name		Time Offered	i		
Student's Name			Date of Birth		
List any Medical Concerns					
Previous Swimming Experience (Swim Center, Arlington Echo, etc.)					
Contact Information					
Street Address	City		State Zip Code		
Parent/Guardian Name	email address				
Day Phone	Evening Phone	-			
 Remember that openings will be filled on a first-come, first-ser Make checks payable to: Anne Arundel County Public Scho 		Number of	Cost per student	Totals	

- Mail completed application and fee to:

Arlington Echo Outdoor Education Center Learn to Swim Program 975 Indian Landing Road, Millersville, Maryland 21108

N 1 6	Cost per student	Totals	
Number of Additional Students	\$55.00 (First Student)	\$55.00	
	\$50.00 =		
	Total Enclosed=		

Course Name	Ages	9:00–9:40	9:45–10:25	10:30–11:10	11:15–11:55
Pre-school Level I	3–4				
Pre-School Level II	3–4			•	
Introduction to Water Skills (Level I)	5–7	•			
Fundamental Aquatic Skills (Level II)	5–7		•	•	
	8–11	•			
Stroke Development (Level III)	6–8		•		•
	8–11			•	
Stroke Improvement (Level IV)			•		•
Stroke Refinement (Level V)					

Learn to Swim Program Application

continued

Student 3	
Course Name	Time Offered
Student's Name	Date of Birth
List any Medical Concerns	
Previous Swimming Experience	
(Swim Center, Arlington Echo, etc.)	
Student 4	
Course Name	Time Offered
Student's Name	Date of Birth
List any Medical Concerns	
Previous Swimming Experience (Swim Center, Arlington Echo, etc.)	
Student 5	
Course Name	Time Offered
Student's Name	Date of Birth
List any Medical Concerns	<u>'</u>
Previous Swimming Experience (Swim Center, Arlington Echo, etc.)	
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