



UW-L Athletic Camps & Clinics
 25 Mitchell Hall
 1725 State Street
 La Crosse, WI 54601

UW-La Crosse is a affirmative action/equal opportunity employer and is in compliance with Title XI and Section 504. Advise us at time of registration if you desire special accommodations. Requests will be kept confidential.

This publication was not produced at taxpayer expense.

**University of Wisconsin-La Crosse
 SUMMER SWIMMING LESSONS 2009**



**SWIMMING LESSONS
 2009**

**Summer
 Swimming
 Lessons**



**Session 1:
 June 15-26**

**Session 2:
 June 29-July 10**

Low instructor to student ratios

Taught by UW-L collegiate swimmers

Lessons designed by UW-L Swimming Coach Richard Pein, PhD.

Join us for the best swimming lessons in the La Crosse area!

**Summer Swimming
 Lessons 2009:**

Session #1 June 15-26

Mitchell Hall Pool

Time	Level
9 a.m.	3,4,5,6,7
10 a.m.	3,4,5,6,7
11 a.m.	3,4,5,6,7,8

Wittich Hall Pool

Time	Level
9 a.m.	1,2
10 a.m.	1,2
11 a.m.	1,2

Session #2 June 29-July 10

Mitchell Hall Pool

Time	Level
9 a.m.	3,4,5,6,7
10 a.m.	3,4,5,6,7
11 a.m.	3,4,5,6,7,8

Wittich Hall Pool

Time	Level
9 a.m.	1,2
10 a.m.	1,2
11 a.m.	1,2

Cost: \$65 per participant
 Red Cross Progressions will be taught.

For more information or to register online, please visit our website at:
www.uwlcamps.com



University of Wisconsin-La Crosse Summer Swimming Lessons 2009

Cost: \$65.00 per participant

Red Cross Progressions will be taught

Level 1	Primary Skills	Child should be comfortable alone in the water
Level 2	Stroke Readiness	Child can swim crawlstroke for 10 feet
Level 3	Stroke Development	Child can swim crawlstroke, backstroke and elementary backstroke
Level 4	Stroke Refinement	Child can swim 5 basic strokes: crawl, backstroke, elementary backstroke, sidestroke and breaststroke
Level 5	Stroke Proficiency	Child can swim 100 yards for each of 5 strokes
Level 6	Advanced Skills	Child has good strokes and wants to learn new skills
Level 7	Competitive	High-level swimmer
Level 8	Springboard Diving	Child must be comfortable in deep water. Learn fundamentals of approaches, takeoffs and dives.

The level descriptions are guidelines for entering students. All students will be evaluated on the first day of class and placed into the proper class for their skill level. Level 1-2 classes will be held in Wittich Hall Pool. Level 3-8 classes will be held in Mitchell Hall Pool. All times and levels will be limited to ensure proper instructor to student ratio. If signing up for classes less than a week prior to the start of classes, please call the camps office at 785-6544 to check for class availability.

For more information or to register for classes online, please visit our website at:

www.uwlcamps.com

Registration Form Summer Swimming Lessons 2009

Name _____ Birthdate _____

Address _____

City _____ State _____ Zip _____

_____ Session 1 (\$65) _____ Level _____ Time Preference

_____ Session 2 (\$65) _____ Level _____ Time Preference

Name of second child participating _____ Birthdate _____

Address (if different) _____

City _____ State _____ Zip _____

_____ Session 1 (\$65) _____ Level _____ Time Preference

_____ Session 2 (\$65) _____ Level _____ Time Preference

Please make checks payable to UW-La Crosse and mail this form with full payment to:

**UW-La Crosse Athletic Camps & Clinics
25 Mitchell Hall
La Crosse, WI 54601**

OR register online at www.uwlcamps.com

Emergency contact _____ Relationship to camper _____

Home Phone # _____ Cell Phone # _____

Email _____

Special Medical Needs _____
Registration implies permission for photos, publicity and inclusion in a participant list unless camp director is notified in writing prior to camp. All camp participants are covered by UW system limited insurance for injury sustained during supervised camp activities. UW-La Crosse is not liable for medical expenses incurred that are not covered by this policy. By signing this form I agree to hold harmless and indemnify UW-La Crosse, their officers, agents, and employees from any and all liability, loss damages, costs, or expenses which are sustained, incurred, or required arising out of the actions of my dependent in the course of the camp. I authorize that any medical, surgical, diagnostic and hospital procedures may be performed by a physician on my dependent if i cannot be reached in the event of an emergency.

Parent/Guardian Signature _____ Date _____