

Swimming Abilities Checklist

Please return this form with your payment.

Participant's Name _____

When I am in the water I can:

- Fully submerge face: 3 seconds
- Supported float on Front
- Supported float on Back
- Bubble Blowing
- Water entry & exit: Chest-deep water
- Hold breath & fully submerge head: 3 seconds
- Retrieve objects: chest-deep water
- Flutter kick on front
- Front & back crawl arm action
- Combined Stroke on back using kick & choice of arm movement
- Retrieve object, eyes open, no support: chest-deep water
- Bob, submerging head completely, in chest-deep water: 15 times
- Jump into deep water from side of pool
- Prone glide with push off: 10 feet
- Swim front crawl, breathing as necessary to front or side: 10 yards
- Standing front dive
- Elementary backstroke: 10 yards
- Front crawl: 25 yards rotary breathing
- Back crawl: 25 yards
- Breaststroke kick: 10 yards

I would like to learn how to: _____

Note for Asthmatic Participants: Swimming and participating in aquatic activities tends to aggravate existing asthmatic conditions. Participants diagnosed with asthma should ensure that they bring any medications with them to all pool sessions.

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McCoy Natatorium
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Mail To

ADULT SWIM LESSONS



SWIMMING LESSONS

Spring

2008

AT
THE MCCOY NATATORIUM

About Swimming Lessons

Come join our adult group swimming lessons this fall. Let our qualified swim instructors teach you the water skills needed to insure safety by the pool while raising your aquatic confidence.

Fee: \$80.00

Location: McCoy Natatorium (Lessons will be held in our indoor instructional pool. This pool is a shallow 3 1/2 -5ft warm water 80°f used primarily for instruction, recreation, therapy, & lap swimming.)

Day: Sundays

Dates: April 6, 2008
April 13, 2008
April 20, 2008
April 27, 2008

Time: 5:00 - 6:00

This class will be limited to 25 participants. If needed a second class may be offered.

Cancellation—The University may cancel or postpone any course or activity because of insufficient enrollment or other unforeseen circumstances.

Refunds— will be made for cancellations received at least one week before the program begins. After that, the individual or organization will be held responsible for the fee. Anyone who is registered but cannot attend may send a substitute with a two day advanced notice.

Why Swim?

- Swimming is a whole body workout, improving cardiovascular conditioning, muscle strength, endurance, posture, and flexibility all at the same time.
- Swimming improves your body's use of oxygen without overworking your heart, providing increased benefits to your cardiovascular system.
- Swimming is a low risk activity because there is no stress on your bones, joints, or connective tissues due to buoyancy.
- Swimming is also very relaxing and is a great way to relieve your stress, allowing more oxygen to flow to your muscles while regulating your breathing.

For More Information Please Contact:

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This publication is available in alternative media on request

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<http://www.athletics.psu.edu/nat/>

Registration Form

Swimming Lessons Spring 2008 This form may be copied for additional registrations. Print in ink or type. Return form to the McCoy Natatorium no later than **Friday March 28, 2008**

Male _____ Date Of Birth _____

Female _____

Participant's Name _____

Address _____

Phone _____

E-mail _____

You will receive a confirmation letter via email as we process registration forms.

I hereby understand that I am registered to participate in the program stated on this sheet. In addition, I understand that this program, like all physical activity, has some inherent risk involved. Furthermore, I am in good physical condition appropriate for the stated activity, and I understand that participants must assume full responsibilities for injuries incurred while taking part in this program. A doctor's release may be required after a serious illness, injury, or hospitalization before returning to the program. I give permission for any medical care that the leaders of the above activity deem necessary.

I hereby consent to the photographic, recording, or reproduction in any other manner of the likeness, voice, and/or activities of the participant and authorize the Pennsylvania State University to make unlimited use of such reproductions. I understand that I will not receive any monetary compensation now or in the future for participating.

Signature _____