



# Swimming Lessons at Dundee Park July 31, Aug 4, 7 & 10 \$60



8:00 – 8:30 am Level 1A Getting Comfortable  
8:40 – 9:10 am Level 1B Learning Basics  
9:20 – 10:00 am Level 2 Beginner

10:10 – 10:50 am Level 2/3 Strong Beginner  
11:00 – 11:40 am Level 3 Intermediate  
11:45am – 12:25pm – Advanced

Certified American Red Cross Water Safety Instructor, Lisa Magiera will assign your child a class time and will notify you as soon as possible by email.

- Limited slots available for each class.
- One adult per family must be present for the duration of class. If Windham camper, a counselor will be present as the adult.
- Priority given in the order of those signed up and paid in full.

Please circle or highlight best answer for Swimmer:

1. When I put my head under water, I am .....Not Comfortable.....Comfortable.....Very Comfortable.
2. Can I hold my breath under water..... Not at all.....For 3 seconds.....For 5+ seconds.
3. I can float on my stomach .....Not at all .....A Little Bit .....Very Well.
4. I can float on my back ..... Not at All .....A Little Bit ..... Very Well.
5. I can Dive ..... Not at All ..... A Little Bit .....Very Well.
6. I know these basic swimming strokes:

☐ Front Crawl ☐ Back Crawl ☐ Breaststroke ☐ Side Stroke ☐ Elementary Back Stroke

Swimmer Name: \_\_\_\_\_ Age on July 31: \_\_\_\_\_

Parents Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Health Information: \_\_\_\_\_

**FMI – Call (207)892-1905 or email [parks&recreation@windhammaine.us](mailto:parks&recreation@windhammaine.us)**

*I understand there are risks of physical injury in participating in Windham Parks & Recreation programs and/or visiting recreational facilities. I hereby release the Town of Windham, its employees, officials, and agents from any and all liability or loss or damage to personal property that my child or I may experience in connection with programs sponsored by, or facilities managed by Windham Parks & Recreation. I hereby consent to emergency medical procedures deemed appropriate or necessary on my and my child's behalf. I further authorize medical personnel to administer any required emergency medical treatment in the event that a guardian/family member cannot be reached by the telephone numbers provided on this form. The Windham Parks & Recreation Department does not provide accident or hospitalization insurance and all participants and/or facility users are advised to have adequate personal coverage. Please consider participant's own health, experience, and tolerance for risk before participating in any program or visiting facilities. I consent to the use of my or my child's photo, video, artwork on the department website or in other promotional materials. The Windham Parks & Recreation Department reserves the right to refuse services to participants if the administration deems necessary for the safety of the participant, other program participants, or staff. I have carefully read the release language and completely understand its content and I agree to all responsibilities in case of an emergency. I sign this document for myself as an individual and as Parent or Guardian of this child.*

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_