



# Swim Lessons at

## IVY LEAGUE DAY CAMP



American  
Red Cross

**GET YOUR CHILD READY FOR SUMMER!!**

**Pre-School - 5th Grade**

**Six- 30-minute Sessions**

**Dates: June 12, 13, 15, 19, 20, 22**



**4:00 - 6:00 PM Group Lessons**

**\$ 175**

**6:00 - 7:00 PM Individual Lessons**

**\$ 250**



All lessons will be 30 minutes.  
You will be contacted prior with your assigned time.

Ivy League's swim program will allow your child to adjust and feel comfortable in the water and/or refine skills and swim stroke development prior to the start of Camp.

The program will be supervised by Ivy League Day Camp's Waterfront Supervisor Melissa Cohen. All classes will be taught by Ivy League Day Camp's Swim Instructors.

**IVY LEAGUE DAY CAMP**  
**140 Gordon's Corner Road, Manalapan, NJ 07726**  
**Phone: 732-446-7035 Fax: 732-446-5623 E-Mail: info@ivyleaguedaycamp.com**

Child's Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Home Phone \_\_\_\_\_ Child's Birthdate \_\_\_\_\_ Child's Age \_\_\_\_\_

Mother's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Emergency Contact other than parent:

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

**Please check the box that appropriately describes your child's current swim level:**

**Water Adjustment**

**Refine Skills and Stroke Development**

**I am signing my child up for:**

**Group Lesson \$175**

**Individual Lesson \$250**

I would like my child to be placed with: \_\_\_\_\_  
(This must be with mutual consent by both parties and same swim level and program)  
(One request per student)

\*If siblings are both enrolled, Ivy League will do its best to assign them to either the same or consecutive time slot.

**Payment in full upon registration. (check only)**  
Please make checks payable to: **Ivy League Day Camp.**

**Terms & Conditions** - No refunds after June 2nd.

I recognize that there is a possibility of physical injury associated with swimming. I hereby release, discharge and/or otherwise indemnify Ivy League Day Camp against any claim by or on behalf of the registrant's participation in the program. I recognize that he/she must be in good health to participate in this program. I further acknowledge that I have read and accept these conditions under which my child's registration is made. Once program begins there will be no refunds.

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_