



2018 Spring Jr. Guard Conditioning

For kids who do not swim competitively, passing the swim test for summer Jr. Lifeguard programs -- or just staying in shape in the water -- can be tough. Join us for a great workout, and be prepared for anything in the water next summer! **Prerequisite: Swimmers under 9: 50 yds freestyle in 1:30 or under. Swimmers over 9: 100 yds freestyle in 2:50 or under. Those unable to meet prerequisite should inquire about lessons.**

FORMS ARE DUE FRIDAY AT 12pm THE WEEK BEFORE YOU WANT TO START LESSONS

Class Days	Class Dates	Class Times	Tuition (Per Lesson)
Monday	February 19 - May 14 (13 classes total)	3:45-4:45pm	Members \$20 Non-Members \$25
Tuesday	February 20- May 15 (13 classes total)	3:45-4:45pm	Members \$20 Non-Members \$25
Wednesday	February 21 - May 16 (13 classes total)	3:45-4:45pm	Members \$20 Non-Members \$25
Thursday	February 22 - May 17 (13 classes total)	3:45-4:45pm	Members \$20 Non-Members \$25
Saturday	February 24 - May 19 (12 classes total)	10:00-11:00am	Members \$20 Non-Members \$25

Class times don't work for you? Need more personalized training? We also offer private lessons -- \$40/half hour for members and \$50 for non-members.

Contact Jacob (jnyeswim@gmail.com) to schedule available times!

Online Resources for Jr. Lifeguard Programs:

LA County Jr. Lifeguards – www.fire.lacounty.gov

Beach Sports Surf and Sport Camps – www.beachsports.org

Please fill out one form per swimmer. Please make checks out to West End. **PLEASE NOTE** that once your registration has been received by West End, **there are NO REFUNDS.** There are **no make-up classes** for dates missed. Classes are closed after 12 swimmers have registered. Late registrations may be taken, space permitting. Under-enrolled classes may be cancelled. **Once dates are picked you may not exchanges dates unless approved beforehand.**

Rain policy: Classes ARE held in the rain but are NOT held when there is lightning within 10 miles of the pool. **Non-members of West End need to bring their own towels.** Non-members are not allowed in the pools unless enrolled in a class. There is also limited designated seating for Non-members. For questions, please email Jacob Nye at: jnyeswim@gmail.com.



2018 Spring JG Prep Program

Swimmer's Name: _____

Address: _____

City: _____ Zip _____ Email: _____

Daytime phone: _____ Evening phone: _____

Swimmer's birthdate: _____ Age: _____ Parent/Guardian: _____

(circle one) Non-Member Member

Swimmers may register for as many days in a week as they wish. For example, you can register for Monday only, or for M/W/F, or for all days.

FORMS DUE FRIDAY 12pm THE WEEK BEFORE YOU WISH TO START

Tuition per lesson: \$20 members, \$25 non-members

<p>___ Feb 19-24 (Checkmark weeks wanted) Days (circle): M Tu W Th Sat Tuition:\$ _____</p> <p>___ Feb 26 - March 3 Days: M Tu W Th Sat Tuition:\$ _____</p> <p>___ March 5 - 10 Days: M Tu W Th Sat Tuition:\$ _____</p> <p>___ March 12 - 17 Days: M Tu W Th Sat Tuition:\$ _____</p> <p>___ March 19 - 24 Days: M Tu W Th Tuition:\$ _____</p> <p>___ March 26 - 31 Days: M Tu W Th Sat Tuition:\$ _____</p> <p>___ April 2 - 7 Days: M Tu W Th Sat Tuition:\$ _____</p>	<p>___ April 9 - 14 Days: M Tu W Th Sat Tuition:\$ _____</p> <p>___ April 16 - 21 Days: M Tu W Th Sat Tuition:\$ _____</p> <p>___ April 23 - 28 Days: M Tu W Th Sat Tuition:\$ _____</p> <p>___ April 30 - May 5 Days: M Tu W Th Sat Tuition:\$ _____</p> <p>___ May 7 - 12 Days: M Tu W Th Sat Tuition:\$ _____</p> <p>___ May 14 - 19 Days: M Tu W Th Sat Tuition:\$ _____</p> <p>Total Tuition: \$ _____</p>
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Release: I hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against West End Racquet and Health Club of Torrance, the club and all its representatives, shareholders, directors, officers, employees, and agents for any and all loss, claims, injury, damages or liability sustained or suffered by me in connection with my participation at this club or any special event sponsored by the club at another location.

Parent/Guardian Signature: _____ Date: _____

Office use only:

CK/Card #: _____ CVC# _____ Exp date: _____

Date: _____ Amt Paid: _____ Employee: _____