

Physique Swim School – 2016/17 School Year Classes
At New Jersey Institute of Technology
(Athletic Center – 80 Lock Street, Newark, NJ)

Session Dates:

Friday at 6:00 or 6:30 p.m. Beg1, Beg 2, Adv 1, Adv 2

Friday at 6:30p.m. Teen’s and Adult’s Swim Class

October 28 – December 16 (7 classes - \$105, no class on 11/25)

January 6 – February 17 (7 classes - \$105)

February 24 – April 7 (7 classes - \$105)

April 21 – June 16 (8 classes - \$120, no class on 5/26)

June 23 – August 18 (9 classes - \$135)

Saturday at 1:00 and/or 1:30 p.m. Beg1, Beg2, Adv1, Adv2

Saturday at 1:30p.m. Teen’s and Adult’s Swim Class

October 29 – December 17 (7 classes - \$105, no class on 11/26)

January 7 – February 18 (7 classes - \$105)

February 25 – April 8 (7 classes - \$105)

April 22 – June 17 (8 classes - \$156, no class on 5/27)

June 23 – August 19 (9 classes - \$135)

Schedule is a subject to change with advanced notification. There is no classes scheduled on major official Holidays. All classes are 30 minutes in length. Parents are asked to have their children on the deck 5 minutes before the class is ready to start. Use a shower and a bathroom before entering the pool, which located at the end of the swimming pool. Latex or nylon cap should be worn by swimmers to keep long hair out of the faces. There are 10 minutes for swimmers to use a changing room before and after the class with adult supervision. We allow two make up classes within this session. Class fee are not refundable after the first lesson. Parents may observe lessons from the bleacher area only. Be aware of our Pool Rules: No running – No gum chewing – No food or drink is allowed in the pool area. Do not interrupt the lessons.

Make a check payable to *Physique*

P.O. Box 441, Oldwick, NJ 08858

(973) 895 – 2865

-www.physiqueswimming.com-

PhysiqueSwimming@msn.com

Physique Swim School Registration Form. Please, fill out it completely.

Student’s Name	Age	Level	Dates	Time
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Parents’ Name _____ / _____

Phone(C) _____ Phone(H) _____

Address _____ Town _____ Zip Code _____

E-Mail Address _____ Check # _____ Amount \$ _____

Credit Card _____ Expiration Date _____