<div align="center">

Physique Swim School –2015/16 Classes
At our Private Swimming Pool in Tewksbury
210 County Road 517, Califon, NJ 07830

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Session Dates:

Monday at 4:00, 4:40, 5:20, 6:00, 6:40 p.m. - Beg.1 & Beg.2, Adv.1, Adv.2
May 2 – June 27 (8 classes - $200, no class on 5/30)
July 11 – August 22 (7 classes - $175)

Wednesday at 4:00, 4:40, 5:20, 6:00, 6:40 p.m. - Beg.1, Beg.2, Adv.1, Adv.2
April 27 – June 15 (8 classes - $200)
June 22 – August 24 (10 classes - $250)

Private classes are available to schedule at any day for any age, any abilities of children or adults 30 minutes - $40.

During the summer we suggest to you and your friend more intensive program to learn how to swim with weekly every day scheduling with following dates:
Monday to Friday at 11:00am, or 11:30am or 12:00noon
June 27 – June 30 (4 classes - $100)
July 5 – July 8 (4 classes - $100)
July 11 – July 15 (5 classes - $125)
July 18 – July 22 (5 classes - $125)
July 25 – July 29 (5 classes - $125)

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Schedule is a subject to change with advanced notification. 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. 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 the session.. Class fee are not refundable after the first lesson. Parents may observe lessons, remain in the sitting area. 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 lesson.
Bring a friend! Referral discount is $15 off from your payment.

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Make a check payable to *Physique*   P.O. Box 441, Oldwick, NJ 08858
  T: (973) 895 – 2865   F: (908)832-0101   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(H)_____Phone(W)_____

Address_____Town_____ZipCode____

E-Mail Address_____ Check#_____Amount_____

Credit Card #_____Expiratiopn Date_____