



PHYSIQUE SWIMMING @ 333 E 66th St  
(333 E 66th St New York, NY 10065)

Spring 2019 Session Dates

**WEDNESDAY - FRIDAY**

3:00pm – 3:40pm – Me & My Shadow, Beginner 1, Beginner 2, Adv 1 & 2  
3:40pm – 4:20pm – Beginner 1, Beginner 2, Advanced 1, Advanced 2  
4:20pm – 5:00pm – Me & My Shadow, Beginner 1, Beginner 2, Advanced 1, Advanced 2  
5:00pm – 5:40pm – Beginner 1, Beginner 2, Advanced 1, Advanced 2

**WEDNESDAYS:** April 3 - June 19 (12 classes, \$45 each, once per week for 40min, \$540)  
**THURSDAYS:** April 4 - June 20 (12 classes, \$45 each, once per week for 40min, \$540)  
**FRIDAYS:** April 5 - June 21 (11 classes, \$45 each, once per week for 40min, \$495) NO CLASS 4/19

**SATURDAY & SUNDAY**

9:20am – 10:00am – Me & My Shadow, Beginner 1 & 2, Advanced 1 & 2  
10:00am – 10:40am – Beginner 1, Beginner 2, Advanced 1, Advanced 2  
10:40am – 11:20am – Beginner 1, Beginner 2, Advanced 1, Advanced 2  
11:20am – 12:00pm – Me & My Shadow, Beginner 1 & 2, Advanced 1 & 2

**SATURDAYS:** April 6 - June 22 (10 classes, \$45 each, once per week for 40min, \$450)  
NO CLASS 4/20, 5/25  
**SUNDAYS:** April 7 - June 23 (10 classes, \$45 each, once per week for 40min, \$450)  
NO CLASS 4/21, 5/26

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**Register online or at the pool and save 10%.**

Registration for Physique Swimming can be arranged online, by credit card over the phone at (212) 725 - 0939 or by sending the registration form to 25 Broadway, 9th Fl New York, NY 10004.

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

| <b>Student's Name</b> | <b>Age</b> | <b>Level</b> | <b>Dates</b> | <b>Time</b> |
|-----------------------|------------|--------------|--------------|-------------|
| _____                 | _____      | _____        | _____        | _____       |
| _____                 | _____      | _____        | _____        | _____       |
| _____                 | _____      | _____        | _____        | _____       |

Parents' Name \_\_\_\_\_ / \_\_\_\_\_  
Phone(C) \_\_\_\_\_ Phone(H) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
\_\_\_\_\_ ZipCode \_\_\_\_\_  
E-Mail Address \_\_\_\_\_  
CC \_\_\_\_\_  
EXP \_\_\_\_\_

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