

# Tsunami Swimming Swim & Stay Fit 2011-2012

Ages 5 through adult - Must be able to swim a length of the pool.  
All classes are held at Fredericksburg Academy Pool



**Sunday Afternoon** COST: **\$65** for 6 classes Time: 4-5 pm or 5-6 pm

- Session 1: September 11, 18, 25, October 2, 9, 16
- Session 2: October 23, 30, November 6, 13, 20, December 4
- Session 3: January 8, 15, 22, 29, February 5, 12
- Session 4: February 19, 26, March 4, 11, 18, 25
- Session 5: April 1, 15, 22, 29, May 6, 20

**Monday & Wednesday Evening** . COST: **\$115** for 12 classes Time: 6:30 to 7:30 pm

- Session 1: September 12, 14, 19, 21, 26, 28 October 3, 5, 10, 12, 17, 19
- Session 2: October 24, 26, 31 November 2, 7, 9, 14, 16, 28, 30 December 5, 7
- Session 3: January 2, 4, 9, 11, 16, 18, 23, 25, 30, February 1, 6, 8, 13, 15
- Session 4: February 20, 22, 27, 29, March 5, 7, 12, 14, 19, 21, 26, 28,
- Session 5: April 2, 4, 16, 18, 23, 25, 30 May 2, 7, 9, 14, 16

**Tuesday & Thursday Morning** COST: **\$115** for 12 classes Time: 5:00 - 6:00 am or 6:00 - 7:00 am

- Session 1: September 13, 15, 20, 22, 27, 29, October 4, 6, 11, 13, 18, 20
- Session 2: October 25, 27, November 1, 3, 8, 10, 15, 17, 29, December 1, 6, 8
- Session 3: January 3, 5, 10, 12, 17, 19, 24, 26, 31, February 2, 7, 9
- Session 4: February 14, 16, 21, 23, 28, March 1, 6, 8, 13, 15, 20, 22
- Session 5: March 27, 29, April 3, 5, 17, 19, 24, 26, May 1, 3, 8, 10

**Tuesday & Thursday Evening** COST: **\$115** for 12 classes Time: 6:30 to 7:30 pm

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- Session 3: January 3, 5, 10, 12, 17, 19, 24, 26, 31, February 2, 7, 9
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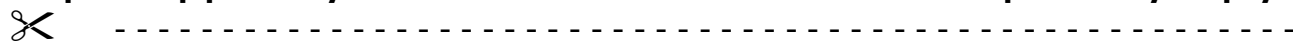
**CLASSES FILL QUICKLY- SO PLEASE REGISTER EARLY!!**

- **Register by mail** Make checks payable to: TSUNAMI SWIMMING  
Mail check and bottom of form to: Tsunami Swimming 365 Belle Plains Rd. Falmouth VA 22405
- **Register online at** [www.TsunamiSwimming.org](http://www.TsunamiSwimming.org)
- **Questions?** 540-371-4369 email: [SwimCoachPeter@yahoo.com](mailto:SwimCoachPeter@yahoo.com)

Need-based financial assistance is available

Paid amount \_\_\_\_\_ date \_\_\_\_\_ Check # \_\_\_\_\_

**Keep the top part for your records. Detach and submit the bottom part with your payment.**



Please register these swimmers for **Swim & Stay Fit**

Swimmer's Name _____	Age _____	Days _____	Time _____	Session _____
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Swimmer's Name _____	Age _____	Days _____	Time _____	Session _____
Swimmer's Name _____	Age _____	Days _____	Time _____	Session _____

Parent Name \_\_\_\_\_ Phone: \_\_\_\_\_ email \_\_\_\_\_ **Please**

**complete an information card for each NEW swimmer. These are available at the pool.**