

# Winter Instructional Swim Program (WISP)



## About the Winter Instructional Swim Program

Since 1985 volunteers have been working together to ensure the continued success of the WISP program. The primary goal is to give local youth the opportunity to participate in Red Cross swim lessons. Through this program children ages four and older will receive instructions on swim techniques as well as water safety and lifesaving procedures.

For eight (8) Friday evenings, starting mid-January, swimmers will have one hour in the pool and take part in a Red Cross swim lesson. The program costs include round-trip transportation to/from Artillery Park Pool in Kingston.

Several lesson times and pick-up points are available. Please see the registration form (reverse) for details.

## Please Note

**Late fee:** There will be a \$10 late fee for anyone that does not submit their registration / payment on time

**Registration Deadline:** **December 1, 2018**

**Forms:** Registration forms can be dropped off at the TLTI Township office, returned to school, or emailed to [ubdegrovem@gmail.com](mailto:ubdegrovem@gmail.com), if emailing registration forms, payment to be made by e-transfer.

**Buses:** NO buses are guaranteed this year. We need minimum registrations to be able to afford to run the four (4) buses. If we do not get the minimum registrations buses will be cancelled and parents will need to arrange for their own transportation or move their child/ren to a time slot where a bus is running

## Volunteering with WISP

The success of this program is dependent on volunteers! We **need** parents and teens to assist children on the bus, take attendance, get in the water during free swim, etc. This is a great opportunity to get those needed volunteer hours in before graduation! If you can help please contact Meagan.

## Positive Opportunity Partnership Program

If you need financial support, please visit <http://www.leeds1000islands.ca/en/playing/Recreation-Subsidy.aspx?mid=103859> or contact Kim at 613-659-2415 ext. 207, email [kgoodman@tonshipleeds.on.ca](mailto:kgoodman@tonshipleeds.on.ca)

## Contact Information

Program Coordinator, Meagan Ubdegrove, at [ubdegrovem@gmail.com](mailto:ubdegrovem@gmail.com)



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**WISP - Winter Instructional Swim  
Program**

# WISP Registration Form



Cheques made payable to: **Winter Instructional Swim Program**    Payment Type: Cheque  Cash

Participant's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 Teacher's Name: \_\_\_\_\_  
 Medical Concerns: \_\_\_\_\_  
 Parents/Guardians Name: \_\_\_\_\_  
 Phone # – Home: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Badge Level: \_\_\_\_\_

**Fees: \$75.00/child**

**Registration fees will not be discounted if a bus is cancelled.**

**Payment due at registration. Registration deadline: December 1, 2018.**

**Late registrations will be charged \$10.00 extra per registration**

**Bus Times: *BUSES ARE NOT GUARANTEED / DEPENDANT ON ENROLLMENT***

Please indicate below which bus assignment you would prefer. We will try to accommodate your request; however, it is dependent on the number of participants. Minimum registration is required to confirm buses. WISP reserves the right to cancel bus times due to low registration. Thank You.

	Lyndhurst		Seeley's Bay		Lansdowne		Gananoque	
	Depart	Return	Depart	Return	Depart	Return	Depart	Return
Bus 1	5:00 pm	8:00 pm	5:15 pm	7:45 pm	5:00 pm	8:00 pm	5:20 pm	7:40 pm
Bus 2	6:00 pm	9:00 pm	6:15 pm	8:45 pm	6:00 pm	9:00 pm	6:20 pm	8:40 pm

Bus Assignment:                      Bus 1                       Bus 2

Pick-up/Drop off:    Lyndhurst Library                       Lansdowne   
                                  Seeley's Bay Library                       Gananoque HS

**Swim Times:**

**Place:**                      Artillery Pool, Kingston, Ontario

**Dates:**                      January 11, 2019 and ending March 1, 2018

**Pool Times:**                      6:00 PM to 7:00 PM or 7:00 PM to 8:00 PM on Friday Evenings

I understand that the Winter Swim Program will not be held responsible for any accidents during this swim season of 2019. In the event, that an emergency situation arises which, in the opinion of the attending physician, requires an immediate decision and I cannot be reached, I authorize the volunteer supervisors to make decisions of a medical nature on behalf of my child.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_