

## TIPTON RECREATION PROGRAMS

### Youth Flag Football (K – 6<sup>th</sup> grade)

- Fee: \$25 per child
- Season: Middle of September through middle of October
- Games: Will be played on Saturdays

### Youth Volleyball (3<sup>rd</sup> – 6<sup>th</sup> grade)

- Fee: \$30 per child
- Season: Middle of September through middle of October
- Games: Will be played on Saturdays or Sundays

### Youth Basketball (1<sup>st</sup> – 6<sup>th</sup> grade)

- Fee: \$30 (1-2 grade), \$50 (3-6 grade) per child
- Season: 1-2 – End of Oct – Mid Dec while 3-6 – End of November – End of Feb.
- Games: Will be played on Saturdays

### Youth Soccer (Preschool – 6<sup>th</sup> grade)

- Fee: \$25 per child
- Season: End of March through beginning of May
- Games: Will be played on Monday or Tuesday evenings

### Youth Baseball / Softball (3<sup>rd</sup> – 6<sup>th</sup> grade)

- Fee: \$40 per child
- Season: Beginning of April through end of June
- Games: Will be played on M & W (3-4 grade) Tu & Th (5-6 grade)
- Games will be played at West Branch, Wilton, Tipton, NC and West Liberty

### T-Ball (Age 5 – 2<sup>nd</sup> grade)

- Fee: \$25 per child
- Season: End of May through end of June
- Games: determined at coaches meeting

### Summer Swim Club (Age 6 – 18)

- Fee: \$60 per child (fee includes swim meets)
- Season: Beginning of June through mid-July
- Practice: Monday thru Friday – 7:45-9:15 am

## JAMES KENNEDY FAMILY AQUATIC CENTER

# SWIMMING LESSONS REGISTRATION



\*Flag Football \*Volleyball \*Basketball \*Soccer  
\*T-Ball \*Baseball \*Softball  
\*Red Cross Swimming Lessons \*Swim Club  
Also offering private Swim Lessons for any age

#### Summer Camps

\*Basketball \*Tennis \*Dance \*Cheer \*Volleyball \*Soccer \*Skate

Visit [www.tiptoniowa.org](http://www.tiptoniowa.org) under Parks and Recreation  
for more information  
700 Park Rd, Tipton, Iowa 52772  
(563) 886-2271

**JAMES KENNEDY FAMILY AQUATIC  
CENTER SWIMMING LESSONS**

Offering Levels 1, 2, 3 & 4

**COST:     \$40.00**

**CLASS SESSIONS AND (DEADLINES):**

Sessions fill up fast, register early to secure your spot!  
Maximum participants: 8 for level 1 and 6 for levels 2, 3 & 4.

Sept 16 – Oct 24 (Sept 13)

Jan 6 – Feb 13 (Jan 3)

Nov 4 – Dec 19 (Nov 1)

Feb 24 – April 9 (Feb 14)

**\*No class the week of Thanksgiving**

April 13 – May 21 (April 10)

**CLASS TIMES:**

Wednesdays 6:15 – 7:00 pm

Saturdays 9:00 – 9:45 am

**\*\*Classes must have a minimum of 4 participants to be held\*\***

**Not sure what level to sign your child up for?**

Does child go under water without hesitation? If NO then

**Level 1: Intro to Water Skills** - Objective is to help student feel comfortable and safe in the water.

Does child float on stomach and back? If NO then

**Level 2: Fundamental Aquatic Skills** – Objective is to give student success with learning 20 different fundamental skills.

Can child tread water for 30 seconds, dive from the side, and swim a “basic” version of: front crawl and backstroke? If NO then

**Level 3: Stroke Development** – Objective is for student to enhance their fundamental skills with some endurance and stroke technique.

Can your child do front crawl for 25 yards, swim breaststroke, or even side stroke? If NO then

**Level 4: Stroke Improvement** – Objective is to fine tune all strokes.

Visit [www.tiptoniowa.org](http://www.tiptoniowa.org) for more information

**SWIMMING LESSONS REGISTRATION**

ONE CHILD PER FORM PLEASE

[www.tiptoniowa.org](http://www.tiptoniowa.org)

Child’s Name: \_\_\_\_\_

Address: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Gender: M F

Parents Name(s): \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

E-mail: \_\_\_\_\_

**Select an option in EVERY box below**

<input type="checkbox"/> September 16 – October 24 <input type="checkbox"/> November 4 – December 19 <input type="checkbox"/> January 6 – February 13 <input type="checkbox"/> February 24 – April 9 <input type="checkbox"/> April 13 – May 21	<input type="checkbox"/> Wednesday 6:15 – 7:00pm <input type="checkbox"/> Saturday 9:00 – 9:45am
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<b>LEVEL:</b>			
1	2	3	4

**\*\*Classes must have a minimum of 4 participants to be held\*\***

**\*\*Make checks payable to: JKFAC\*\***

Name on Card: \_\_\_\_\_ Exp. Date: \_\_\_\_ / \_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**PARENT/GUARDIAN STATEMENT:**

I certify that this child is in normal health and capable of participation in Swimming Lessons. I grant permission for him/her to participate and in doing so I hereby release any rights and claims for injuries and damages I may have against James Kennedy Family Aquatic Center, its Board of Directors or employees, officials, or coaches. I understand that the James Kennedy Family Aquatic Center does **NOT** carry accident insurance on swim lesson participants.

Parent’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b><u>For office use only:</u></b>	Cash	CC	Ck# _____
Date: _____	Pynt: \$ _____	Initial: _____	