

# COR Swim School

## Winter February - March, 2026 Session 5

**GARLAND ISD NATATORIUM**  
2585 Firewheel Parkway, Garland, TX 75040

*\*Payment due in full the first day of each session, cash or check only*  
Check payable to: COR Swimming

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### **TUESDAY Class** (\$100 for 4 Classes) Note time changes - Only 2 time options.

Tuesday Classes: 5:30 – 6:00 PM / 6:00 - 6:30 PM (Circle One Time)

Tuesday Session 5 Class Dates: February 17, 24 & March 3 & 10 - (4 classes - \$100)  
*No refunds for missed classes. Please read dates carefully.*

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### **THURSDAY Class** (\$100 for 4 Classes) Note time changes - Only 2 time options.

Thursday Classes: 5:30 – 6:00 PM / 6:00 - 6:30 PM (Circle One Time)

Thursday Session 5 Dates: February 19, 26 & March 5 & 12 (4 classes - \$100)  
*No refunds for missed classes. Please read dates carefully.*

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**\*USA SWIMMING POOL DECK POLICY:** No parents/guardians will be allowed on deck for Swim School classes. Instructors will help Swim Schoolers get to and from the pool. Parents may observe from the lobby or stands. I appreciate your cooperation with this Swim School policy. Please note: **You may not video record any other swimmers.**

**PLEASE INITIAL THAT YOU HAVE READ THIS POLICY:** \_\_\_\_\_.

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Swimmer's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_

**Level of Ability: Please indicate what applies to your child.** (Circle what applies to your swimmer)

My Child: WILL NOT put face in water / is uncomfortable in the water / fearful of the water

My Child: IS able to hold breath underwater / blow bubbles, IS comfortable but unable to swim unassisted

My Child: IS able to swim short distances (from side to parent / parent to parent, etc.)

My Child: IS able to swim 15-20 yards unassisted, float on stomach / back, and ready to learn competitive strokes

My Child: IS able to swim 25 yards or more, strong recreational swimmer, some knowledge of competitive strokes

Parent's Name: \_\_\_\_\_ Returning? Last Cone Color? \_\_\_\_\_

Home Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email. \_\_\_\_\_ (Please Print Clearly)

**Send this completed forms and questions to Coach Maggie Shook: [maggieshook@corswim.org](mailto:maggieshook@corswim.org)**