

## General Camp Information

### Meeting Time:

9:00 am—3:00 pm  
Extended Camp Care is available from  
8AM-5:30PM @ \$10/hour

### Lunch:

Campers bring their own snack & lunch.

### Location:

Pace University  
Goldstein Recreation Center  
861 Bedford Road  
Pleasantville, NY 10570

### Age:

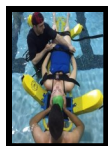
Ages 5 thru 15

### Fee:

\$565/week

**Complimentary t-shirt for all campers.**

Also Offered through Westchester & Fairfield

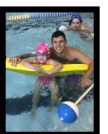


**Lifeguard Training** (must be 15  
by last day of class)



**CPR & AED** for the Professional  
Rescuer

**RTE** (Responding to Emergencies)

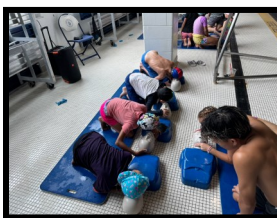


**Water Safety Instructor** (must be  
16 by last day of class )

If you have any questions please contact  
**Katherine Palladino at:**  
Phone: (914) 760-6493  
Email: [kpalladino@westfairswim.com](mailto:kpalladino@westfairswim.com)  
[www.westfairswim.com](http://www.westfairswim.com)

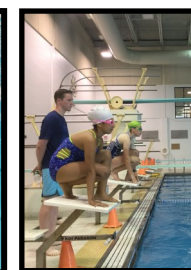


**Westchester & Fairfield  
Swimming and Lifeguarding  
P.O. Box 34  
Pleasantville, New York 10570**



**Westchester & Fairfield**  
  
**Swimming and Lifeguarding**

**Swim Camp  
June 29-July 31, 2026  
Weekly Availability**



**WESTCHESTER & FAIRFIELD  
SWIMMING AND LIFEGUARDING**

# Westchester & Fairfield Swim Camp

## Typical Daily Schedule

9:00 – 9:15 am	Check In
9:20 – 10:00 am	Group Swim Instruction
10:05 – 10:50 am	Diving, Starts & Turns, Lifeguard skills & More
10:55 – 11:40 am	Field Games
11:45 – 12:25 pm	Lunch
12:30 – 1:15 pm	Fun Fitness
1:20 – 2:05 pm	Special Activity
2:15 – 3:00 pm	Water Safety & Games

- All swimming is overseen by certified Water Safety Instructors.
- Daily intensive swim instruction geared to all levels.
- Comprehensive preparation for summer swimming.
- Great supplement for summer swim team.
- Camp emphasis on swimming, but additional activities included.
- Extended care hours available.



Please check weeks attending.

\_\_\_\_ Week 1: June 29-July 3  
 \_\_\_\_ Week 2: July 6-July 10  
 \_\_\_\_ Week 3: July 13-July 17  
 \_\_\_\_ Week 4: July 20-July 24  
 \_\_\_\_ Week 5: July 27-July 31

\*The more weeks the better, but minimum of 2 weeks strongly recommended.

## Registration Form

PLEASE PRINT LEGIBLY !

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip \_\_\_\_\_  
 Sex: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_  
 Current Grade Level: \_\_\_\_\_  
 Circle Shirt Size: S M L Youth or Adult  
 Parent / Guardian Name(s): \_\_\_\_\_  
 Phone Day: \_\_\_\_\_  
 Phone Evening: \_\_\_\_\_  
 Cell Phone (other): \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Doctor's Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Name of Insurance Carrier: \_\_\_\_\_  
 Illnesses, Allergies, Medications, Etc: \_\_\_\_\_  
 Date of last tetanus: \_\_\_\_\_  
 Signature for Consent to Treat: \_\_\_\_\_  
 To best serve your child, are there any special behavioral or medical needs? Y or N \_\_\_\_\_  
 Emergency contact: (if parents cannot be reached)  
 Name & Phone: \_\_\_\_\_  
 How did you hear about us? \_\_\_\_\_

**Mail check payable:** Westfair Swim & LGT  
 Check # \_\_\_\_\_ Total \_\_\_\_\_

-Fee: \$560/week

-5% Early Bird Discount available for multiple week registrations and with payment by check only. Must be received by March 15.

**Credit Card #** \_\_\_\_\_

**Type:** MC Visa **Code** \_\_\_\_\_ **Exp** \_\_\_\_\_

**Signature:** \_\_\_\_\_

## Westchester and Fairfield Swimming & Lifeguard (WFS&L) Release

I, \_\_\_\_\_ (print parent's name) hereby acknowledge that any athletic training or demonstration or participation program may involve certain risks to any participant including, without limitation injury to person or to personal property. I fully understand these risks and voluntarily wish to have my child, \_\_\_\_\_ (print child's name) participate in the WFS&L swim camp at Pace University on \_\_\_\_\_ (print dates). I fully understand and hereby acknowledge that the camp is not conducted, supervised, or endorsed by Pace University, and that WFS&L is not in any way a partner or joint venturer of, or otherwise connected to or controlled by Pace University. In consideration of \_\_\_\_\_ (print child's name) being permitted to participate in camp, I hereby agree to assume all the risks and responsibilities surrounding such participation undertaken as an adjunct thereto, including, without limitation, those of injury to person or personal property; and further, for myself, my heirs, personal representatives, and assignees. I hereby agree to defend, hold harmless, indemnify, release forever, and forever discharge WFS&L, Pace University and all their trustees, officers, agents, and employees from and against any and all threatened and imposed claims, demands, and actions or causes of action, on account of damage to personal property, or personal injury which may result from the aforesaid participation and activities incident thereto. Further, it is hereby certified that the above-named participant has no medical or psychological conditions which would preclude such participation. I hereby authorize Pace University through its authorized agents to secure for \_\_\_\_\_ (print child's name) any emergency medical treatment that becomes or that may become necessary as a result of participation in camp. WFS&L retains the rights to any photographs of participants to be used for advertising or publicity.

I acknowledge I have read and understand this document.

\_\_\_\_\_  
 Signature of parent or guardian & Date