



Summer Swimming Schedule

SPAR and Rock Solid Sports have joined forces to offer the citizens of Shreveport an array of swimming opportunities at Southern Hills Community Center. The partnership was born out of the tireless efforts of both entities to establish a collaboration that will meet the needs of and benefit the Shreveport swimming public. Rock Solid Sports will operate the pool and offer a wide array of aquatic programs, including summer camp swimming lessons, regular swimming lessons, seniors water aerobics, along with public swimming hours.

2009 SUMMER POOL SCHEDULE

Mondays	Closed
Tuesdays	4:00pm - 8:00pm
Wednesdays	4:00pm - 8:00pm
Thursday	4:00pm - 8:00pm
Fridays	4:00pm - 8:00pm
Saturday	9:00am - 4:00pm
Sunday	2:00pm - 5:00pm

Read: [Press Release](#)

P.O. Box 18224
Shreveport, LA 71138
(318) 861-4747



AQUATICS APPLICATION

(All Lessons take place at the Southern Hills Pool)

Child's Information

Name: _____ Date of Birth: _____ Sex: _____

Parent's Information

Name _____ Date of Birth: _____ Sex: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Email: _____

Please Select Time, Age Group & Session:

Age Group

- 6 Months-2 Years With Parents
- 3 Years With Parents
- 3 Years Without Parents
- 4-6 Years Old
- 7-12 Year Olds
- Adult (13 Years +)

Session Time

- 9:00-10:00am
- 10:00-11:00am
- 5:00-7:00pm (Mondays Only)

***Mondays are open lessons, however you must call 861-4747 to reserve a spot as space is limited. (\$15/session)**

Available June 15-August 31

Available Sessions

- Session 1: June 9-11, June 16-18
- Session 2: June 23-25, June 30-July 2
- Session 3: July 7-9, July 21-23
- Session 4: July 28-30, Aug 4-6

Price

- (\$40) All sessions are Tuesday-Thursday
- (\$40) with makeup times on Friday!!!
- (\$40)
- (\$40)

Private Lessons

(\$25 per hour, please call 861-4747 to reserve)

I verify that I am the parent/legal guardian of the above participant and that he/she has my permission to participate in Rock Solid Aquatics. I hereby authorize the staff and volunteers of Rock Solid to act for me according to their best judgment in any emergency requiring medical attention. I understand that Rock Solid carries no medical, dental or accident insurance on participants and I agree to assume full responsibility for any medical or dental treatment resulting from participation in any Rock Solid Programs. I understand and agree that the above named is voluntarily participating in the Rock Solid programs at his/her risk. I agree to assume full responsibility for any damages or injuries to him/her in this program and related activities. I hereby fully and forever exonerate and discharge Rock Solid, it's staff, volunteers, directors, officers and agents from any and all claim, demands, damages, rights of action, present or future, whether the same be anticipated or unanticipated, resulting from or arising out of participation of this program.

PARENT/GUARDIAN

DATE