

## **SWIM Central Water Safety Education Questionnaire**

Parents: Do you know that drowning is the leading cause of death among children?
Complete this form to receive information to protect your child from drowning.

Parent Name:	Child's Name:	Date of Birth:	
Your information is for the use of the Broward County Swim Central Program.   1. How would you rate your own swimming ability?   Unable to swim   Can swim a little, but NOT comfortable in deep water   Able to swim for an extended period of time in deep water   Able to swim for an extended period of time in deep water   Able to swim for an extended period of time in deep water   Able to swim for an extended period of time in deep water   Able to swim for an extended period of time in deep water   Able to swim for an extended period of time in deep water   Able to swim for an extended period of time in deep water   Able to swim for an extended period of time in deep water   Able to swim for an extended period of time in deep water   Able to swim for an extended period of time in deep water   Able to swim a little, but NOT comfortable in deep water   Able to swim a little, but NOT comfortable in deep water   Able to swim a little, but NOT confortable in deep water   Able to swim a little, but NOT confortable in deep water   Able to swim a little, but NOT confortable in deep water   Able to swim a little, but NOT confortable in deep water   Able to swim a little, but NOT confortable in deep water   Able to swim a little, but NOT confortable in deep water   Able to swim a little, but NOT confortable in deep water   Able to swim a little, but NOT confortable in deep water   Able to swim lessons or call or save to expensive     Able to swim lessons are not little period expensive     Able to swim lessons   Arm to be part to be part to swim lessons for your child?     Able to swim lessons are not limportant     Able to swim lessons are not little period expensive     Able to swim lessons are not limportant     Able to swim lessons     Arm to swim lessons     Able to swim lessons     Able to swim lessons     Able to swim lessons     Arm to swim lessons     Able to swim lessons     Able to swim lessons     Able to swim lessons     Able to swim lessons     Arm to swim lessons     Able to swim lessons     Able to swim le	Parent Name:	Parent Signature	Date
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Unable to swim Can swim a little, but NOT comfortable in deep water Able to swim for an extended period of time in deep water  2. Has your child ever received formal swimming lessons? Yes No, check all the reasons below that apply: Do not know how to find information about swim lessons Swim lessons are not important Schedule of lessons not convenient Equipment such as swim suit, towel, goggles too expensive We are too busy  3. Do you or a family member know how to perform CPR with rescue breaths? Yes No No 4. Has your child's doctor talked to you about drowning prevention and water safety? Yes No 5. Would you redeem a \$40 coupon to apply to the cost of swim lessons for your child? Yes, visit Water SMART Broward Swim Instruction for details. No  ART ONE FOR OFFICE USE ONLY: Troward Ordinance 2004, Section 7-8 requires parents/guardians to complete SWIM Central questionnaire are or Child Care Facilities to mail or fax a copy to SWIM Central. Also required is a copy of this form to be placed ach child's file to be monitored by the staff of the local licensing agency.  acility Name: Ordinance 2004, Section 7-8 requires parents/guardians to complete SWIM Central questionnaire are or Child Care Facilities to mail or fax a copy to SWIM Central. Also required is a copy of this form to be placed ach child's file to be monitored by the staff of the local licensing agency.  SWIM Central 3700 NW 11 <sup>th</sup> Place Lauderhill, FL 33311	Your information is f	for the use of the Broward County Swim Central Pro	gram.
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