

## **Private Swimming Lesson Registration 2025**

Child's First Name:_	L;	ast Name:
Age: B	irth date:	<u></u>
Address:		Do you pay a City water bill?  yes  1
Parent's Name:		Phone:
	<u>Emer</u>	gency contact:
Name	Phone #:	Relationship:
	Medical Int	formation & Release
Health Conditions:		
Allergies:		
Doctor:	Phor	ne #:
arrives. <b>In the event I</b> Additional parent com	cannot be contacted, the ER st	taff may do any lifesaving measures deemed necessary.
Signature:		Date:
those living inside of week beginning on Choose requested   June 9 – 1  9:00	tity limits and \$85/week for June 9th through July 21st unweek and time:  3:	day) for 45 minutes a day. The price is \$75/week for those living outside city limits. You may choose a ntil slots are full.  une 30 – July 4:  □ 9:00am  □ 7:00pm  □ 7:00pm
☐ June 16 – ☐ 9:00 ☐ 6:00	<u>_</u>	uly 7 − 11: ☐ 9:00am ☐ 7:00pm
	27: 🔲 Ju Dam Dpm	uly 14 − 18: □ 9:00am □ 7:00pm