

Swimming Lesson Registration 2023

Child's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Age: \_\_\_\_\_ Birth date: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Do you pay a City water bill? \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Emergency contact:

Name \_\_\_\_\_ Phone #: \_\_\_\_\_ Relationship: \_\_\_\_\_

Any Additional Information: \_\_\_\_\_

Medical Information & ReleaseAny Health Conditions: **NONE** \_\_\_\_\_ If yes, please explain \_\_\_\_\_Allergies: **NONE** \_\_\_\_\_ If yes, please explain \_\_\_\_\_

I hereby give permission to transport my child by ambulance when urgent medical care is deemed necessary by the Plymouth Community Pool Staff. I understand that the family is responsible for the cost of this transfer. I hereby give permission for the hospital emergency room staff to render any and all EMERGENCY care before a parent/guardian arrives. **In the event I cannot be contacted, the ER staff may do any lifesaving measures deemed necessary.**

Additional parent comments: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Lesson Information

**Lessons are 4 days a week for 45 min. each day and cost \$40 for residents, \$50 for non-residents. If we lose a day to weather that class will be made up on Friday of that week.**

Has your child taken swim lessons before? \_\_\_\_\_ Level of last class COMPLETED \_\_\_\_\_

<b>Session 1</b> (June 5 – June 15)	Level number _____	Time choice: 10am 11am
<b>Session 2</b> (June 19 – June 29)	Level number _____	Time choice: 10am 11am 6pm
<b>Session 3</b> (July 3 – July 13)	Level number _____	Time choice: 10am 11am 6pm
<b>Session 4</b> (July 17 – July 27)	Level number _____	Time choice: 10am 11am

*Level choice may need to be changed according to the discretion of the swimming instructors*

There is a \$15 fee for any cancellations