

Spring Mill Swim Club Swim Lesson Registration Form

Name	D.O.B	/	/	Age
Parent Name				
Address				
Phone Number				
Does the participant have any med be aware? (i.e. diabetes, asthma, al				
YES (please list)				
You will be contacted	by our staff to sche	dule le	ssons	
Would you prefer: Morning	_ Afternoon	Eve	ning _	
Please check below for your private	e lesson			
(1) 30 minute session \$35	(1) 60 minute s	session	\$70	
(5) 30 minute sessions \$175	(5) 60 minute sessions \$300			
(10) 30 minute sessions \$350	(10) 60 minute	session	ıs \$600	
-	ls for missed lessons, n			
if a child is not willing	to participate once cla	sses sta	rt**	
Make-Up lessons will be sch	eduled if a lesson need	ds to be	cancelle	<u>ed</u>
Spring Mill Swim Club assumes no resp	onsibility for the safet	y of any	users (of the pool or
equipment or loss o	r damage to personal	propert	y	
Parent/Guardian Signature		[Date	
Payment Date / / Amount	to be charged \$	(Cash Cl	neck CC