



**SWIMMING LESSON REGISTRATION FORM 2010**

**NOTE: PLEASE FILL OUT COMPLETELY FOR EACH CHILD YOU WISH TO REGISTER**

**CHILD INFORMATION**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Day/Month/Year

Address: \_\_\_\_\_ Health Card #: \_\_\_\_\_  
(no.) (street)  
\_\_\_\_\_  
(city) (province) (postal code) Email: \_\_\_\_\_

Allergies/Medical Conditions: \_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Home Phone #: \_\_\_\_\_  
Alternate Phone #: \_\_\_\_\_  
Room #: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Previous Level Achieved: \_\_\_\_\_

Level Registering: \_\_\_\_\_ Rate: \_\_\_\_\_

Private lesson x \_\_\_\_\_ = \_\_\_\_\_

Semi – private lesson x \_\_\_\_\_ = \_\_\_\_\_

**Paid By:** Cash Cheque M/C Visa Amex Diners Card  
Card #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_  
Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

**SEMI PRIVATE POLICY**

We cannot guarantee semi – private lessons unless there is a second student signed up. If we are unable to book another swimmer the price will be increased from the semi private rate to the private rate a lesson. Please initial acknowledgement. \_\_\_\_\_

**CANCELIATION POLICY**

Only a credit is offered when canceling up to two weeks notice. No refunds will be granted. Please initial acknowledgement. \_\_\_\_\_