

| Adult Contact Name: | | Phone: | | |
|--|--|--------------|--------------------|-----------|
| Email: | | | | |
| American Red Cross private and sen are available as a package of (5) less minimum age of 3 years old or have | ons. It is recom | mended th | at students are | |
| Please Circle Preference: | | | | |
| Private (1 swimmer 30 minutes) | Member \$75 | Non- | member \$90 | |
| Semi-Private (2 swimmers 45 minutes) *Both swimmers must be | | | | |
| The lesson fees include admission for the use the facility such as the pool and/o | | | | |
| Please give the instructor 24 hour no from your account. The instructor w | | | | e removed |
| Please Circle Your Day(s) / Time Prefere | ence | | | |
| Monday Tuesday Wednesday Thursd | lay Friday Satu | rday Sunda | ay. | |
| Weekdays: 3:30pm to 5pm 5pm to 7:30p | om | | | |
| Saturdays: 8:30am to 10am 10am to 12pm | | | t begin until 12pn | |
| Sundays: 10am to 1pm 2:30pm to 4p | weekends, therefore family members cannot swim before, during, or after the lesson time. | | | |
| Name of Swimr | ner | Age | Swim Level | |
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| | | | | |
| Special Comments: | | | | ' |
| | | | | |
| I have read and und | erstood the guid | elines on th | nis form. | |
| Signature: | ature: Date: | | | |