



## Barre City Pool SWIM LESSON REGISTRATION

### **Participant Information**

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_

Email Address: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, & Zip: \_\_\_\_\_

Current Swimming abilities: \_\_\_\_\_

Does the participant have any medical conditions that the lifeguards or staff should be aware of?  
(Diabetes, asma, suffering from seizures, etc.)

**Circle: Yes or No If yes, explain:**

\_\_\_\_\_

10:00 -10:30 \_\_\_\_\_ 10:30 -11:00 \_\_\_\_\_ 11:00-11:30 \_\_\_\_\_ 11:30-12:00 \_\_\_\_\_

You will be contacted to coordinate dates for your lesson.

Half hour lessons with one instructor possibility of 1 observing instructor, five days out of the week.

☐ Resident - '\$47

☐ Non- Resident - '\$47

**There will be no refunds for missed lessons, no shows, or if the participant refuses to participate once class has begun.**

### **Parent/Guardian Contact Information:**

Name: \_\_\_\_\_ Relationship to participant: \_\_\_\_\_

Contact Numbers: (HP) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_

Emergency Contact Cell Phone Number: \_\_\_\_\_

### **Permission:**

Indemnity clause (to be signed by participant or parent/ Guardian - Above 21 years of age)  
The instructor has the right to cancel lessons in the event of bad weather conditions or other dangerous causes.

I, \_\_\_\_\_ grant permission for my child/ward,  
\_\_\_\_\_ to participate in swimming lessons put on by the Barre City pool.