



Select Lesson Type
(Please select one category & circle options -
See web or flyers for explanation of lessons)

Group Lessons:

Class Level: Sand-fiddlers / Stingrays / Dolphin Stroke Clinic
Session: I / II / III / IV
Time: AM / PM

Private Lesson:

Preferred time: *Morning / Afternoon / Evening*

Semi Private Lessons:

Preferred Time: *Morning / Afternoon / Evening*

SWIM LESSON REGISTRATION FORM

PARTICIPANT'S NAME

CURRENT AGE

BIRTH DATE

PARENT / GUARDIAN (FOR PARTICIPANTS UNDER 18)

HOME ADDRESS

PHONE NUMBER

CITY / STATE / ZIP

EMAIL ADDRESS

PARTICIPANT'S ABILITIES (EX.- CAN PUT FACE IN WATER, SWIM 200 YARDS IN 4 MINUTES, ETC.)

SPECIAL NEEDS, CONCERNS, OR COMMENTS

WAIVER

I, for myself or as parent or guardian, hereby assume all risks and hazards incidental to the conduct of the activities and transportation to and from the activities. I release and absolve and indemnify TTS, Inc., SAP, Inc. PAS, LLC, Sunset Ridge Racquet and Swim Club, employees of the Club, volunteers and or sponsors from all risks and hazards associated with the activity and in the event of injury, do expressly waive all claims against them.

CANCELLATION POLICY

Cancellations received 1 week prior to the start of class will be entitled to a full refund. After that date, a cancellation fee of \$10 will be charged. A pro-rated refund may be made upon instructor recommendation.

Participant's / Parent's Signature

Date

OFFICE USE ONLY / DO NOT WRITE BELOW THIS LINE

DATE RECEIVED: _____ AMOUNT PAID: _____ INSTRUCTOR: _____