

Swim Lesson Registration Form

To participate in swim lessons, the swimmer must be at least 4 years of age as of June 24th, 2019.

Member Name: _____

Member Number: _____

****Please be aware there will be a \$70 fee billed to your account for each session you register for.**

Participant Name: _____ Age on June 24th: _____

Parent/ Guardian: _____

Phone Number: _____ Email: _____

(This number and email address will be used for lesson cancelations and any notices needed to be made by the teaching staff)

Emergency Contact Name: _____

Emergency Contact phone number: _____

Please List any medical conditions or concerns the coaching staff should be made aware of:

Session 1: June 24th - July 17th		Session 2: July 22nd - August 14th	
Monday/ Wednesday 11:00-11:30am		Monday/ Wednesday 11:00-11:30am	
Tuesday/ Thursday 11:00- 11:30am		Tuesday/ Thursday 11:00- 11:30am	

*** Please indicate desired time for lesson***

I, _____ understand that neither Lancaster Country Club, nor anyone associated with the pool, including but not limited to the teaching staff, assumes responsibility for accidents, medical, dental or other expenses incurred as a result of participating in lessons. In case of emergency illness or injury, emergency treatment is authorized and will be completed by coaching staff.

Signature: _____

In the case of lesson cancelation: a make-up date and time will be announced for participants