

2018 Summer Swim Lessons

Session 1: June 4-15 Session 2: June 18- 29 Session 3: July 9-20

Cost: \$45 per session, per child

| Student Name | Age | Male | or Female |
|---|------------------------|---------------|-------------|
| Taken swim lessons before? Y N Where? | | approx. lev | /el |
| Student Name | Age | Male | or Female |
| Taken swim lessons before? Y N Where? | | approx. lev | /el |
| Parent/Guardian | | | |
| Name(s) | | | |
| Address | Phone | ; | |
| Email | @ | | |
| CIRCLE Session choice: S CIRCLE Session Time: 1 | | | |
| ** Sessions & times are filled | on a first come, first | serve basis.* | * |
| If someone OTHER THAN PARENT OR | GUARDIAN will | pick up or dr | op off from |
| lessons, please indicate: | | | |
| Name | Phone | | |
| Relationship to student: | | | |

Waiver

Permission is hereby given for the above named individual(s) to take swimming lesson instruction and the said individual(s) are free from any physical or organic disease. It is agreed that the above individual(s) will be subject to all safety and sanitary regulations enforced by the staff of the swimming program. I hereby agree in the case of accident, illness, or loss of possessions, the Barracuda Swim School, the Louisburg Swim Team, the City of Louisburg, their pool employees, instructors, and volunteers will not be held responsible.

| INITIAL below indicating you understand the following: |
|--|
| I have read AND understand the waiver above. |
| NO refunds will be made except for illness and injury occurring BEFORE sessions begin or for cancellation due to low class enrollment. All requests for refunds must be <u>in writing</u> and occur before the session begins, and submitted to a swim lesson representative. |
| No refunds or make ups will be given for student missed lessons after session has started (i.e. vacation, illness, etc) |
| I understand the make up dates listed below. |
| Make up dates (due to inclement weather): |
| Session 1 & 2 July 6-7 |
| Session 3: July 23-27 |

Mail in registrations will be accepted after May 1st, 2018.

Mail to: Louisburg Swim Team, PO Box 852, Louisburg, KS 66053.

Checks payable: Louisburg Swim Team

Contact barracudaswimschool@gmail.com with questions!