Private Lesson Registration Form

Childs name:		Birth Date:	
Session(s):	Level:	Time:	
Parent/Guardian Name:		Pool Member: Yes No	
Address:			
Home Phone:	Cell/Other Phone:		

I understand that it is my responsibility to bring my child to class prepared and on time. Make up classes will be scheduled for cancellations due to weather, instructor illness or pool closure. Make up lessons will not be offered to children who miss class due to personal/family schedule conflicts. Class fees must be paid by the start of the first class of each session. A \$25.00 fee will be charged for all returned checks for non sufficient funds. Refunds will only be given if you withdraw your child prior to the first day of class. The Wildewood Community Pool offers Nationally Certified Red Cross Swimming Lessons. All Sessions will be taught according to the American Red Cross guidelines. All instructors are certified through the American Red Cross.

Wildewood Community Association shall not be liable in any way for any loss or damage to personal property or any loss or damage arising out of or as a result from any death or personal injury sustained by any Member, guests of a Member, or swim lesson participation, parent or guardian, in connection with admission to or use of the Wildewood Community Association Pool. The risks include, but are not limited to, injuries arising from participation in physical activities or use of the swimming pool or equipment.

Paren	t/Guardian Signature:		_ Date:
Paid:	Date:	Cash or Check Number	Amount
	Date:	Cash or Check Number	Amount
	Date:	Cash or Check Number	Amount
	Date:	Cash or Check Number	Amount
	Date:	Cash or Check Number	Amount