



FOR YOUTH DEVELOPMENT®
 FOR HEALTHY LIVING
 FOR SOCIAL RESPONSIBILITY

2021 Summer Swim Lesson Registration Form

NOTE: If you are looking to sign up for PRIVATE swim lessons, please let the front desk staff know so that they may give you the correct form.

Cost: Members \$60 Potential Members \$70

Participant's Name: _____ DOB: ___/___/___

Gender: _____ Age: _____

Address: _____ City: _____ State: _____

Parent/Guardian: _____ Cell Phone: _____

Email: _____

Emergency Contact: _____ Phone: _____

Medical Alerts/Allergies: _____

Sessions (circle one):

Session 1	Session 2	Session 3	Session 4	Session 5
(May 25-June 3)	(June 7-June 17)	(June 21-July 1)	(July 5-July 15)	(July 19-July 29)

Class Level (circle one):

Infant-Toddler (6 month-3 years old) Time: _____

Preschool Swim Basics (3-5 years old, Water Introduction) Time: _____

School Age Swim Basics (6-12 years old, Beginner and Safety Basics) Time: _____

School Age Swim Strokes (6-12 years old, Advanced Swimming) Time: _____

Adult (13 years and up, All Skill Levels) Time: _____

Program Release/Waiver

Participant or guardian assumes all risks of injury arising out of his/her presence on or about the YMCA premises, use or intended use of equipment and facilities, or his/her participation in the activities of the Tiftarea YMCA, a Georgia chartered not for profit corporation and does hereby for himself, herself, heirs, executors and administrators waive, release, and agree to hold free from all claims for damages the Tiftarea YMCA and its respective officers, directors, Trustees, Board of Directors, members, employees, or agents. I hereby allow the YMCA to take pictures (still or video) of myself and/or my children and grant permission for these images to be used in YMCA publications, presentations, publicity, or promotions. I have answered all above questions accurately, and declare myself/family to be physically sound, having medical approval to engage in YMCA activities, have read the information above agreeing for myself and as a chosen representative for my family to the policies and procedures of the Tiftarea YMCA.

Signature (Parent or Guardian)

Date