

2021 SWIM LESSON REGISTRATION FORM

To register, you may fill the form out and send it to aquatic@williamsburgiowa.org. You may also fill it out and drop it off at the city hall. If you have any questions about the lessons, please contact Lauren Hobbs via aquatic@williamsburgiowa.org or call (319) 330-8799.

Participant's Name: Last _____ First _____

Date of Birth: _____ Age: _____ Height: _____

Primary Guardian: _____

Cell Phone: _____ Work Phone: _____ Alt. Phone: _____

Address: _____ City: _____ Zip Code _____

Alternate Emergency Contact: _____ Phone: _____

Has your child participated in swim lessons in the past? If yes, what was the last level completed and who was the instructor?

YES or NO Level 1 Level 2 Level 3

Instructor _____

Are there any health issues that might affect swimming ability or any other information you feel is important?

Private \$100.00

Sessions: 8, 30-minute lessons Monday-Thursday Please circle Session Number	Times: (Please mark your first choice and second choice)
<u>Session 1: June 7th-10th & June 14th-17th</u>	8:00am _____ 8:30am _____ 9:00am _____ 9:30am _____
<u>Session 2: June 21st-24th & June 28th-July 1st</u>	10:00am _____ 10:30am _____ 11:00am _____ 11:30am _____
Levels: Descriptions of levels are described more in detail on the website (https://williamsburgiowa.gov/aquatic-center/)	
____ Level 1- Intro to Water Skills	____ Level 3- Stroke Development
____ Level 2- Fundamental Aquatic Skills	____ Level 4- Stroke Improvement and Refinement
Instructor Preference: _____	

In signing this document, I hereby certify that _____ is in good health. I also agree not to hold the Williamsburg Community School or the City of Williamsburg responsible in the event of an injury incurred while participating in swimming lessons.

Parent's Signature _____ Date _____

OFFICE USE ONLY:

Session: _____ Time: _____ L.G.: _____

PAYMENT

Cash: _____ Check# _____ Amount: _____

Date: _____ Received by: _____