

# REGISTRATION FORM

Swimmer's Name: \_\_\_\_\_ Parent Name: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Email \_\_\_\_\_

Swimmers Age when class starts (i.e. 2 & 4mos) AGE \_\_\_\_\_ MONTHS \_\_\_\_\_ Gender F \_\_\_\_\_ M \_\_\_\_\_

Has your child ever taken swim lessons? Yes No With us? Yes No What year? \_\_\_\_\_

For your child's age, do you consider their ability: Beginner Average Advanced D.O.B. \_\_\_\_\_

Does your child have any special needs? \_\_\_\_\_

## FALL 2017 8 WEEK SWIM SESSION

### AUGUST 21<sup>st</sup> (Monday) – OCTOBER 14<sup>th</sup> (Saturday)

DOLPHINS - PARENT & TOT 6 months – 3 years

PENGUINS - AGES 3-5

SHARKS - AGES 6-12

STINGRAYS - PRETEEN - ADULT

CIRCLE YOUR SCHEDULE

TIME:	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	TIME:	SATURDAY
10:00 AM			PENGUINS	DOLPHINS	8:00AM	SHARKS
						PENGUINS
11:00 AM			PENGUINS	PENGUINS	9:00 AM	SHARKS
			DOLPHINS			PENGUINS
					10:00 AM	PENGUINS
4:30 PM	PENGUINS	PENGUINS	PENGUINS	PENGUINS	11:00 AM	DOLPHINS
		SHARKS	DOLPHINS			
5:30 PM	SHARKS	DOLPHINS	PENGUINS	DOLPHINS		
		PENGUINS	SHARKS			
6:30 PM	STINGRAYS					

Please Initial the following, stating that you have read the notices;

\_\_\_ **Parking Notice:** Please do not park in front of Grey Tactical (Orange Building) Parking for swim lessons is in front of Yellow building, and parking lot in back.

\_\_\_ **Sunscreen:** Must go on 30min before class or at home. Please no sunscreen on the pool deck.

Sunscreen KILLS our filters and does no good for your child unless it is on: 30MINS PRIOR to swim!!

\_\_\_ **Weather:** Text: **Follow EmrldCoastScuba to 40404**

Since we are effected by weather, the easiest and quickest way for us to let you know if your class is cancelled is to send you a text. **PLEASE DO THIS NOW!!!**

Release of Liability:

In consideration of participant being allowed to participate in the registered Learn to Swim Class (s) or program(s), the undersigned hereby releases Sea Mint Pond Swim School, Emerald Coast Scuba, & Village Enterprises, Inc., their employees and agents, from any action, claim or demand for personal injury or property loss arising from or due to any act or omission of Sea Mint Pond Swim School, et al, its agents or employees. I verify that all of the above information is true and correct. I have also read, understand and will comply with the policies and procedures set by Sea Mint Pond Swim School and its Agents.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

