

# V.I.S.D. Aquatics Center

Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Swimmer's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Parent or Guardian Name: \_\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_

**What level of Swimmer is your child? Please Check ONE of the following:**

- Beginner- Beginning swimmer, no experience.
- Novice- Able to swim with assistance (Floaties) - little experience.
- Swimmer- Able to swim short distances without assistance- some experience.
- Experienced- Able to swim longer distances, majority of all strokes.
- Expert- Returning swimmer, able to swim all strokes

Parent or Guardian Name: \_\_\_\_\_

Print

Signature

Management: \_\_\_\_\_

Print

Signature

**OFFICE USE ONLY:**

PAID - INITIALS \_\_\_\_\_

CASH – AMT \$ \_\_\_\_\_

CHECK – Chk # \_\_\_\_\_

Private Lesson \$45

Semi-Private Lesson \$40

Lesson Dates- \_\_\_\_/\_\_\_\_/\_\_\_\_ Through \_\_\_\_/\_\_\_\_/\_\_\_\_