

HACKETTSTOWN COMMUNITY POOL

SWIM LESSON REGISTRATION FORM

PARTICIPANT'S NAME _____

PARTICIPANT'S AGE _____ PHONE NUMBER _____

ADDRESS _____

EMERGENCY CONTACT NAME _____

EMERGENCY CONTACT PHONE NUMBER _____

RELATIONSHIP TO PARTICIPANT _____

.....

LEVEL 1 _____ LEVEL 2 _____ LEVEL 3 _____

LEVEL 4 _____ LEVEL 5 _____ LEVEL 6 _____

WATER AEROBICS (10:00-10:45) _____ WATER AEROBICS (10:45-11:30) _____

ADULT LAPS & LESSONS _____ IPAP _____ LIFEGUARDING COURSE _____

.....

MEMBER - \$25.00 _____

TOTAL _____

BADGE NUMBER _____

NON-MEMBER - \$50.00 _____

CHECK # _____

.....

PLEASE READ CAREFULLY

Checks returned for insufficient funds will require an additional \$20.00 processing fee, in addition to cash or money order payment for the program. You will be called if there is a change in schedule. Your canceled check will serve as your receipt.

As in any activity, there are inherent risks and injuries that may occur. I hereby release and discharge the Town of Hackettstown, its agents, employees, appointed officials, volunteers, commissions, or associates from any and all actions for losses, damages, or personal injury to myself or my child which may occur or arise out of my or my child's participation in the above activity.

SIGNATURE _____

DATE _____