



2009 SWIM SCHOOL REGISTRATION FOR SUMMER SCHOOL KIDS!



Camper's Last Name _____ First Name: _____
 Member Account #: _____ Birth Date: ____/____/____ Age: _____
 Parent's Name: _____ Work Phone: _____
 Address: _____ City/Zip: _____
 Home Phone: _____ Pager/Cell: _____

SUMMER CAMP SWIM LESSONS (12:20 – 12:50PM, 4 DAYS) \$55/member \$70/non-member

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|---|-------------------------|--|---------------------|
| <input type="checkbox"/> Session 1 | May 25 – 29 | <input type="checkbox"/> Session 7 | July 6 – 10 |
| <input type="checkbox"/> Session 2 | June 1 - 5 | <input type="checkbox"/> Session 8 | July 13 – 17 |
| <input type="checkbox"/> Session 3 | June 8 - 12 | <input type="checkbox"/> Session 9 | July 20 – 24 |
| <input type="checkbox"/> Session 4 | June 15 - 19 | <input type="checkbox"/> Session 10 | July 27 – 31 |
| <input type="checkbox"/> Session 5 | June 22 - 26 | <input type="checkbox"/> Session 11 | Aug 3 - 7 |
| <input type="checkbox"/> Session 6 | June 29 – July 3 | | |

Children's Swim Lesson Questionnaire

On the first lesson we will evaluate your child and put them in the appropriate group.

Have you taken swimming lessons with Franco's before? _____ Last completed level? _____
 How old is your child? _____ Does your child go to day care or school? _____
 Child's swim experience: Total Beginner Some Experience No Strokes
 Some Strokes needs to needs to learn Rhythmic breathing Can 1 length of the pool with side breathing
 Does your child have any separation anxiety? _____ Is your child comfortable in the water? _____
 Can your child put his/her face in the water? _____ If yes, In bath tub? _____ In pool? _____
 Does your child respond better to a more firm teaching style, or a more relaxed teaching style?

 Describe your child's personality: _____

Franco's Athletic Club, being a private club, is only to be used by members and their guests. If I am not a member, I understand that I only have access to the pool area, locker rooms and Grill area for my child immediately prior to, during, or after the swim lesson and that I, or my child, cannot use any other part of the club unless it is being used for this program.

The undersigned desires to voluntarily utilize the services and, if applicable, facilities and equipment provided by Franco's Athletic Club. As a consideration for the right and privilege of being permitted access to Franco's Athletic Club, and if applicable, facilities and equipment, the undersigned does hereby release Franco's Athletic Club, its owners, agents, and employees from any and all liabilities of any kind whatsoever arising out of any physical or mental injury or damage incurred or sustained by the undersigned, minor child of the undersigned, or the undersigned's property, while voluntarily preparing to use, using or cleaning up after using, any of the services and applicable facilities and equipment provided by Franco's Athletic Club; and furthermore, agrees to save and hold harmless Franco's Athletic Club, its owners, agents, and employees, for any damages or injuries arising out of the undersigned's, or the undersigned's minor child, use of the facilities, equipment and/or services. The undersigned also acknowledges that photos may be taken for publicity/marketing purposes and gives his/her authorization for any photos of his/herself, or of their minor child, to be used in this fashion.

Furthermore, the undersigned acknowledges that he or she has obtained independent medical approval to use the services, facilities and equipment provided by Franco's Athletic Club for themselves, or for their minor child, and that he or she has made Franco's Athletic Club aware of any limitations suggested by his/her physicians.

The undersigned acknowledges and affirms the he or she has carefully read this release and has asked and obtained a satisfactory explanation of any part that he or she does not understand.

SIGNATURE _____ DATE: _____
 PRINTED NAME OF MINOR CHILD _____ PHONE # _____