



OFFICE USE ONLY	
CLASS _____	
TIME _____	
PAID _____	DATE _____
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INITIALS _____	

PRIVATE & SEMI-PRIVATE SWIM INSTRUCTION

Designed for beginners and those wishing to improve their skills. Private or semi-private lessons can be easily scheduled to fit your needs.

Session Information

Days: Monday through Friday
Times: Schedule with BCRD Aquatic Center front desk

Ages: All ages

Lessons: 1/2 hour ea.

Fees: Private - \$30.00 per 1/2 hour
Semi-Private - \$18.00 each person, per 1/2 hour
(*instructional fees only)

FEE MUST BE PAID IN ADVANCE

Registration Form

Name _____ Age _____

Mailing Address _____ Phone _____

Emergency Phone _____ Phone _____

Swimming Experience _____

Number of lessons _____ Private Semi private Total Fee _____

Lesson schedule: Dates(s) _____ Time(s) _____

Medical Information: Please list any special medical problems you may have:

Physician _____ Phone _____

Medical Insurance Carrier _____ Policy No. _____

Release: In consideration of acceptance into this program, I hereby certify that I, _____, am physically fit to participate in all swimming activities sponsored by the Blaine County Recreation District. I understand that all safety precautions will be taken, but am aware of the inherent hazards and dangers of all sports including swimming and take full responsibility for any injury or accident that may occur.

I am covered by medical insurance or am willing to pay any necessary medical expenses myself.

Participant or parent signature

Date