

EAGLE HARBOR-DEL CITY

SWIM LESSON REGISTRATION FORM Lessons Provided by the Midwest City YMCA

Name of Swimmer: _____ Sex: ____ Birth date: ____/____/____ Age: _____

Address: _____ City: _____ Zip: _____ First time in Lessons? Y or N

Home Phone: _____ Work Phone (Mom): _____ Work Phone (Dad): _____

Parent/Guardian: _____ Email Address: _____

Emergency Contact: _____ Phone: _____ Relationship: _____

CLASS INFORMATION:

❖ **Title of class:** _____ **Session Dates:** _____ **Time** _____

AGREEMENT

Hold Harmless Agreement:

I agree to indemnify and hold harmless the YMCA of Greater Oklahoma City, its officers, directors, employees, agents, and representatives from any and all claims, demands, injuries, damages, and/or losses, whether personal or property, sustained by me or any members of my family while on any YMCA premises or while involved in any YMCA sponsored activity.

Program Attendance Policy:

Participant attendance is important. In an effort to provide programs/services to desiring participants the YMCA attendance policy states that if the enrolled participant does not attend the first lesson of a session and they did not contact the YMCA instructor or Aquatic Director the registration is cancelled. A participant on the waiting list then will fill the class opening. YMCA Swim Lessons are progressive; therefore if a participant misses more than two lessons they may be removed from the swim lesson session. If you register after the registration has closed, you will be charged a \$10 late

fee registration. I have read and agree to abide by the program attendance policy.

Photo Release:

I give permission for the YMCA to photograph my family and me. Photographs may be used in YMCA publications, newspaper stories, or used in house for bulletin boards, etc.

Class Cancellation Policy:

The YMCA due to weather or pool closings may cancel classes. The YMCA will guarantee one make-up class per session due to weather or pool closing. I have read the class cancellation policy.

Refunds for swim lessons must be requested no later than the last day of registration for that upcoming month swim lesson session. Refunds will not be given once the scheduled session has begun.

Signature of Parent or Guardian: _____ Date: _____

Initial of Parent you received the Swim Lesson Parent Informational Sheet: _____

For office use:

Date Entered In: _____ by (staff initials) _____ Financial Assistance % _____

Membership Status: Member Youth/Child/Adult Non-Member

Payment amount: \$ _____ Check (w check #): _____, Credit Card, Cash, Draft