

# SWIM LESSON SIGN UP



## PERSONAL INFORMATION

KIDS NAME

AGE

ADDRESS

PHONE

## EMERGENCY CONTACT

PARENTS NAME:

ICE PHONE NUMBER:

## SESSIONS

SELECT  
SESSION

SESSION 1: JULY 8- 18TH

SESSION 2: JULY 22ND- AUGUST 1ST

SESSION 3: AUGUST 5TH- 15TH

Please add any necessary information on the back!