

# Roland Municipal Swimming Pool

Phone: 515-215-0683

## Swimming Lesson Registration Form for 2024

Check payable to: City of Roland

Class sizes are limited to the first 10 youth in each class.

American Red Cross lessons are 40 minutes in length.

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

Parent's Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Phone \_\_\_\_\_

*Indicate the appropriate class level, session, and time:*

### Swim lesson level desired:

\_\_\_\_\_ Level 1 – Intro to Water Skills

\_\_\_\_\_ Level 2 – Fundamental Aquatic Skills

\_\_\_\_\_ Level 3 – Stroke Development

\_\_\_\_\_ Level 4 – Stroke Improvement

\_\_\_\_\_ Level 5 – Stroke Refinement

\_\_\_\_\_ Level 6 – Swimming Skill & Proficiency

### Sessions:

\_\_\_\_\_ June 17-28, Weekdays

\_\_\_\_\_ July 8-19, Weekdays

### Class Times:

\_\_\_\_\_ 10:00 – 10:40 a.m.

\_\_\_\_\_ 11:00 – 11:40 a.m.

\_\_\_\_\_ 7:15 – 7:55 p.m.

Lesson Fee: \$40.00 per session

### Permission:

Please read and sign this form granting permission for your child to participate in swimming lessons at Roland Pool.

\_\_\_\_\_ has my permission to participate in swimming lessons held by the Roland Municipal Swimming Pool. I hereby, for myself, my heirs, executors, and administrators, waive any and all rights and claims to damages I may have against the City of Roland, their subcommittees, agents, representatives, and assigns, whether employed or volunteer, for any and all injuries or damages suffered by me or my child at said recreation program. I release the right for the Roland Municipal Pool staff to seek medical attention for my child in the event of an emergency.

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only:**      **Date:** \_\_\_\_\_      **Amount Paid:** \_\_\_\_\_