

Family Number _____

Greenville Town Pool
Swim Lesson Registration Form 2019

Name of Parent/Guardian		
Address		
City	State	Zip
Home Phone	Work/Cell Phone	
2 nd contact name & number		

½ hr. lesson: Pre-School 2/3: Pre-School 4/5 Red Cross Levels: 1, 2, 3, 4, 5, 6

Name of Participant	Age	DOB	Desired session & Level	Fee (\$20/15/10)*

*Residents will have a family cap on swim lessons of \$50.00 per session.

Swim lesson cost: 1st session \$20, 2nd Session \$15, third Session \$10, or 1st child/2nd child/3rd child
(Swim lesson fee reduction is for multiple paid sessions in the same year. For example, if you child's first paid lesson of the season is session 2, you will pay \$20 for that session, and receive the discounted rate of \$15 for session 3.) Lesson length .5 hrs. Exact time of sessions TBD after registrations are complete.

Make Checks Payable to **Town of Greenville.** Greenville Resident? YES NO

Please check desired session and note Time:

_____ Session 1 June 17 th -June 27 th ½ hr. lesson between 5pm-6:30pm	_____ Session 2 July 8 th -July 18 th ½ hr. lesson between 9:30am-12 noon	_____ Session 3 July 29 th - Aug. 8 th ½ hr. lesson between 9:30am-12 noon
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I hereby give my child/children permission to participate in the Greenville Swim lesson Programs at the Greenville Town Pool 16 Adams St. I am aware of the risks involved with swimming and do waive, release, and agree to hold harmless the Town of Greenville, Volunteers, and staff for any claim arising out of the regulations put forth by the pool, as operated by the Town of Greenville. Failure to obey the rules may result in dismissal from grounds. Town of Greenville is not held responsible when the pool closes due to inclement weather. Lessons that are canceled due to weather will not be made up.

Photo: Photos are taken at the pool. I _____ give permission for my child(rens)'s
(Parent/Legal Guardian)
picture to be used on, Facebook/newspaper/posters/at pool.

Signature _____ Date _____
Parent/Legal Guardian

Office use only: Cash or Check # _____ Received by _____ Date _____