



SWIMMING LESSONS

2017 REGISTRATION FORM
\$30.00 PER SESSION
CHILDREN MUST BE 5 & OLDER UPON
REGISTRATION

PLEASE FILL OUT A SEPARATE FORM FOR EACH CHILD AND COMPLETE ALL SECTIONS

Child's Name: _____ Date of Birth: _____ Age: _____

Home Phone #: _____ Cell Phone #: _____

Full Mailing Address: _____

E-Mail: _____ ☐ I would like to receive Rothesay Recreation information by email.

Medicare Number: _____ ☐ Male ☐ Female

Medical Conditions or Allergies: _____

Parents/Guardians Contact Information:

Name: _____ Phone #: _____

Name: _____ Phone #: _____

SCHEDULE OF SESSIONS AND LESSONS

(Please check the preferred session(s), beach, and level(s) you would like to register for)

☐ Session 1: July 4 – July 14 ☐ K-Park or ☐ Renforth

10am-10:30am: Level ☐6 ☐7 ☐8 ☐9 ☐10 10:30am-11am: Level ☐1 ☐2 ☐3 ☐4 ☐5

☐ Session 2: July 17 – July 28 ☐ K-Park or ☐ Renforth

10am-10:30am: Level ☐6 ☐7 ☐8 ☐9 ☐10 10:30am-11am: Level ☐1 ☐2 ☐3 ☐4 ☐5

Please read this form carefully and be aware that in registering yourself or your minor child/ward for participation in Rothesay's Summer Swimming Lesson program(s), you will be waiving and releasing all claims for injuries you or your child/ward might sustain arising out of the program(s). I recognize and acknowledge that there are certain risks of physical injury to participants in the program(s) and I agree to assume the full risk of any such injuries, damages, or loss regardless of severity which I or my child/ward may sustain as a result of participating in any of the program(s). I hereby fully release and discharge Rothesay and its officers, agents, servants and employees from any and all claims resulting from injuries, damages and losses sustained by me or my child/ward, and arising out, connected with, or in any way associated with activities of any of the programs.

Parent/Guardian Signature: _____ Date: _____