



Swimming Lesson Registration

Name of Participant: _____ Date of Birth (mm/dd/yyyy): ____/____/____ Age: ____

Parent Guardian: _____

Phone Number: _____ Email: _____

Emergency Contact: _____ Relationship: _____ Phone: _____

Does your child have any health concerns we should be aware of? **YES/NO** If yes, fill in below:

Please choose your lesson session preference:

___ Session 1: Two Week **July 8-19**

___ Session 1: One Week **July 8-12**

___ Session 1: One Week **July 15-19**

___ Session 2: Two Week **July 22-August 2**

___ Session 2: One Week **July 22-26**

___ Session 2: One Week **July 29-August 2**

___ Session 3: Two Week **August 6-16**

___ Session 3: One Week **August 6-9**

___ Session 3: One Week **August 12-16**

Lesson Level	Two Week	One Week
Parent & Tot	\$49.00	\$30.75
Preschool 1-5	\$55.00	\$34.75
Swimmer 1, 2, 3	\$60.25	\$37.75
Swimmer 4, 5, 6	\$66.25	\$41.75
Rookie, Ranger, Star	\$82.00	\$56.00
Bronze Cross / Bronze Medalion		\$230.00
NEW! Private Lessons	\$30.00 / 45min session	

Register in Level: _____

Payment: Please circle **Cash/Credit/Cheque #** _____ **Total: \$** _____

- **Registration for lessons will be first come, first served.**
- **Participants will not be registered for lessons until payment is received.**
- **Post-dated cheques will not be accepted.**
- Your receipt of registration can be picked up at the Thomon Lake Office once lessons begin.
- Refunds will only be given if the cancellation is made 1 week prior to the first lesson; all refunds are subject to a \$10 administration fee. Refunds will be processed by cheque through the administration office – please allow 1 month

Thomson Lake Supervisor:

1. Reserves the right to assign the registrant to the group that the instructors deem most important for their age and ability.
2. Reserves the right to request any registrant to withdraw from the program prior to its termination if in the opinion of the Supervisor or Staff, the registrant is not acting in a reasonable manner.
3. Reserves the right to cancel, with 100% refund, any session due to any circumstances that are not to the benefit of the registrant or the program.

Signature of Parent/Guardian: _____ Date: _____