La							ler	
Con of La Reps	20)18 P	RIVATE	SWIM	LESSO			
Texas	Regi	Registration Form - \$70 per person per session						
SESSION:	11:00 A.M.	I	Π	ш	IV			
SESSION: (Circle One)	6:30 P.M.	Ι			IV	V		
Student Name	:		I	Date of Birth:				
Age:	Return	ing Stude	nt (2017): Y	/es No	0			
Mailing Addre	ess:			(City:		_ State:	
Parent Name:	rent Name: Phone #(s):							

I, the undersigned, hereby agree to abide by all rules and policies as established by the La Feria Aquatic Center and the City of La Feria. I certify that my child is physically fit to participate in the PRIVATE SWIM LESSONS. I assume all risks associated with the program and so hereby waive, release and agree not to hold the City of La Feria, the La Feria Aquatic Center and any other sponsors or individual responsible for any injury resulting in the participation in the PRIVATE SWIM LESSONS.

Should my child become ill or injured as a result of the program, I authorize my child's representative to obtain emergency medical treatment.

Photos will be taken for promotional use and any other legitimate purposes. Unless otherwise stated, permission is granted to use your photo.

Parent/Guardian Signature: _____ Date: _____

Email:

THANK YOU FOR YOUR PARTICIPATION IN OUR PRIVATE SWIM LESSONS!

FOR OFFICE USE ONLY						
Money Order Check	Money Order/Check Number					
Cash Credit/Debit Card						
LIFEGUARD						