

# 2010 Swim Lesson Registration Forms

Parent Name: \_\_\_\_\_

Member     Nonmember

Contact Number: \_\_\_\_\_

Child Name: \_\_\_\_\_

Age: \_\_\_\_\_

Child Name: \_\_\_\_\_

Age: \_\_\_\_\_

Child Name: \_\_\_\_\_

Age: \_\_\_\_\_

Please check which session and time you would like to have your child(ren) signed up for.

<u>Session</u>	<u>Time</u>	
<input type="checkbox"/> <b>June 7<sup>th</sup> – 17<sup>th</sup></b>	<input type="checkbox"/> 10:00	<input type="checkbox"/> 10:30
<input type="checkbox"/> <b>June 21<sup>st</sup> – July 1<sup>st</sup></b>	<input type="checkbox"/> 10:00	<input type="checkbox"/> 10:30
<input type="checkbox"/> <b>July 5<sup>th</sup> -15<sup>th</sup></b>	<input type="checkbox"/> 10:00	<input type="checkbox"/> 10:30
<input type="checkbox"/> <b>July 19<sup>th</sup> -29<sup>th</sup></b>	<input type="checkbox"/> 10:00	<input type="checkbox"/> 10:30
<input type="checkbox"/> <b>August 2<sup>nd</sup> – August 13<sup>th</sup> (if needed)</b>	<input type="checkbox"/> 10:00	<input type="checkbox"/> 10:30

**\*\*Please bring cash or check the first day of swim lessons. Make checks payable to Carolina Pool Management.\*\***