



Swim Lessons Starfish Swimming® Program Registration



Month of class: _____

Student Name _____

Address _____

City _____ State _____ Zip _____

Email address _____

Phone (h) _____ (w) _____

Student Date of Birth _____ Age _____ Sex _____

Emergency Contact Name _____

Phone _____

How did you find out about the Swim Lesson Program? Please circle.

Advertisement A Friend Previous Lessons Walk in Other _____

COURSE INFORMATION: New sessions start every month!

Please Circle SWIM or STROKE School & which time/level

StarFish Swim School (3 groups)

5:30-6:00PM White/Red

6:00-6:30PM Yellow

6:30-7:00PM Blue/Green

StarFish Stroke School

6:00-6:30PM

6:30-7:00PM

Does your child have any special needs? No ____ Yes ____
If yes, please include details _____

PLEASE READ

- I understand that the Family Fitness Works requires all parents/caregivers to remain at the pool during a child's swim lessons.
- I understand that registering reserves a spot in the swim lesson program. Because space is limited and instructors contracted, cancellations cannot be refunded.
- I understand that missed lessons cannot be made up, and refunds are not issued.
- I understand that I and/or my child may be photographed and/or filmed while participating in Family Fitness Works programs and that the photographs or video images may appear in marketing or educational materials.
- I agree to assume all liability for my child/children while attending any program managed by Family Fitness Works for Family Fitness Works. I further agree to hold harmless Family Fitness Works or any of its officers, agents, employees or assigns for any complications or injury that may result to my child/children or to me while at the Family Fitness Works.
- I understand that the Family Fitness Works reserves the right to cancel any program and to change fees where applicable.
- I agree to adhere to Family Fitness Works pool rules, policies and procedures.

Print Name _____

Sign Name _____ Date _____

REGISTRATION CONFIRMATION (Completed by Front Desk)

Date _____ Sold by _____

Fees: (Circle)

Member	Non-Member
\$60 Course Registration fee	\$65 Course Registration fee
\$55 Discounted fee - Renewal	\$60 Discounted fee - Renewal
\$50 Discounted fee - 2 nd child	\$55 Discounted fee - 2 nd child

A \$20.00 late fee will be applied to registrations received less than 2 days before the session begins.

Method of Payment:

Cash Check # _____ Credit Card

Notes:

Family Fitness Works 213 North 3rd Street Richmond, IN 47374 | 765.935.9191
Pool Location: Tiano Pool, 380 Hub Etchinson Pkwy, Richmond, IN 47374