

HARRISON SWIM SCHOOL

2018 REGISTRATION FORM

11520 Kanuba Court, Clermont, FL 34715
407-234-9921 (cell) ginswim14@gmail.com

PLEASE PRINT:

Parent's Name (Last) _____ (First) _____

E-Mail Address: _____

Contact Phone Numbers (Hm) (_____) _____ (Cell) (_____) _____

Student Name (Give last name if different than parent)	Age & DOB	Last Swim Class Completed (Give class and Year) Group or Private?	Session(s) 1 st & 2 nd Choice	Time 1 st & 2 nd Choice
1.				
2.				
3.				
4.				

- ◆ *I have read the **Important Reminders** and I agree with the Swim School's policies and procedures.*
Please initial: _____
- ◆ *I am a **NEW CLIENT** and I understand that before I register, I must speak with Ms. Ginny.*
Please initial: _____

Please indicate if your child has any health concerns, learning disabilities or special needs. By providing this information, I will be able to adjust my teaching style to ensure an enjoyable and successful experience for you and your child.

Student's Name: _____

Explanation: _____

PRICING

Infant/Toddler 1-2 years	Description	Cost
PRIVATE LESSONS		
o New or Returning Students	2 consecutive Sessions; 16 lessons @ 15min	\$300
GROUP LESSONS		
o 3 minimum/4 maximum per group	8 (30 minute classes) Monday-Thursday	\$150
Age Group 3-14 years		
Description		
o Fearful Students	2 Sessions; 16 lessons @ 30 min	\$600
o New or Returning Students	1 Session; 8 lessons @ 30 min. lessons	\$300
ADULTS 15 years & older		
Description		
	1 Session; 4 lessons @ 60 min	\$300
	2 Sessions; 8 lessons @ 60 min	\$600

Please make checks payable to **Harrison Swim School.**