

UPPER MORELAND SWIM CLUB

Swim Lesson Registration Form 2018

Swim Lessons at the Upper Moreland Swim Club are intended to teach the fundamentals of swimming in a fun and safe environment while encouraging pool safety as well as courtesy to other swimmers. Student participation is encouraged through one-on-one and group activities as well as through games.

Please be advised that all requests for lessons at a specific time cannot always be accommodated. Students must be 5 years of age to enter the program. Classes average 8 students to every teacher, but may vary. Every class will have at least one certified lifeguard as an instructor. Students are expected to follow the standard operating procedures of the UMSC. Failure to do so may result in the removal from the swim lesson program. Lessons run Monday through Thursday; Friday will be used as a rain date. Lessons run for 45 minutes. We do not refund lessons missed by the student. **Please see the Swim Lessons Program Director, Gabriella Cassidy, or Jess Healy, Pool Manager, with any questions.**

Student Information

Student's Name	
Age	
Birth Date	
Parent/Guardian Name	
Membership Card Number	
Home Phone	
Work Phone	
Emergency Contact	
E-mail Address	

Skill Levels – Beginner I, II or III, Advanced Beginner and Intermediate. Please see the Manager on duty or www.uppermorelandswimclub.com for differentiation.
*****NEW** – Adult and Tot Lessons – Adult will accompany child in pool to begin learning swimming skills. This is for children who are not old enough to take direction in a class of students and need more encouragement by a parent/guardian.

Cost Per Session: \$35 (first student) and \$20 (each additional student) *Adult and Tot Lessons: \$15**

	YES/NO	SKILL LEVEL	CLASS TIME
SESSION 1 (June 18– June 29)			11:00 – 11:45 am
SESSION 2 (July 2– July 13)			11:00 – 11:45 am
SESSION 3 (July 16 – July 27)			11:00 – 11:45 am

Medical Information

NAME: _____

Cardiac Problems	YES	NO	Seizure Activity	YES	NO
Diabetes	YES	NO	Blood Disorders	YES	NO
ADD/ADHD	YES	NO	Learning Disabilities	YES	NO

Please explain or comment briefly on any conditions the student has seen a physician for. All information in this area will be kept strictly confidential, but is necessary in order to inform instructors so they can accommodate any special needs that the student may have.

Please list any current medications the student is on: _____

Please list all known allergies: (ex. bee stings, medications) _____

Additional comments/notes to the instructor: _____

This agreement dated _____ by and between the Upper Moreland Swim Club, a non-profit organization, and _____ (parent/guardian) authorizes _____ (student), a minor, to participate in Upper Moreland Swim Club’s swim lesson classes. I agree not to hold the Upper Moreland Swim Club, provider of these swim lessons, or the instructors of the swim lessons, employed by the Upper Moreland Swim Club, responsible for any injuries that may occur during swim lessons or transportation to and from swim lessons. Furthermore, I understand that students risk dismissal from class if the operating rules and procedures of the swim club are not followed.
Please bring check or cash when turning in this form for the swim lessons.

PARENT/GUARDIAN Signature: _____ Date: _____

Office Use only: What session and how did they pay (check or cash). CK #