

CITY OF LULING SWIM LESSONS

There are four (4) different times to choose from and your child(ren) may attend more than one session. There is a discount for siblings (in the same family- not cousins or friends) and multiple sessions for siblings and single children. Payment is due upon registration to reserve your spot. Spots will be limited!

| | 1 session | 2 sessions | 3 sessions | 4 sessions |
|------------|-----------|------------|------------|------------|
| 1 child | \$110 | \$200 | \$290 | \$380 |
| 2 children | \$200 | \$320 | \$440 | \$560 |
| 3 children | \$290 | \$390 | \$510 | \$630 |

Circle Session(s):

- Monday, June 12 to Friday, June 16, 11:30-12:00p
- Monday, June 12 to Friday, June 16, 12:00-12:30p
- Monday, June 19 to Friday, June 23, 11:00-11:30a
- Monday, June 26 to Friday, June 30, 11:00-11:30a

Dress Code and Behavior:

Students must bring their own towel, necessities, and goggles are optional.

Students must wear a swim suit and swim shirts are allowed.

___ I understand that I am responsible for getting my child to and from lessons. Once the lesson ends, either my authorized individual or I will pick up my child(ren).

___ I hold the City of Luling and their agents, volunteers and employees harmless from any and all liability or claims which may arise out of or in conjunction with my child's participation in this event.

___ I understand that in the event of disciplinary problems, either my authorized individual or I will be contacted to pick up my child from this event.

___ I do hereby authorize the City of Luling Lifeguards to arrange for emergency medical treatment in the event my child becomes seriously ill or injured while attending this event. Parent/Guardian will be contacted immediately at the number provided below.

___ I have notified of any particular medical problems or limitations on treatment in which the supervisors should be aware of in the event it becomes necessary to arrange for medical treatment of my child.

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___ I understand there will not be a refund if I remove my child from the swim lessons, or if my child is not able to attend every lesson. I will receive a refund only if the class is canceled by the City of Luling or if I withdraw my child before starting lessons.

___ I have read all information and rules and hereby give my child permission to attend this event.

Printed Parent/Guardian name

Authorized individual name

Parent/Guardian Signature

Authorized Individual telephone

Parent/Guardian Telephone

Child's name and age

(Circle one) Beginner Intermediate Experienced

Child's name and age

(Circle one) Beginner Intermediate Experienced

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