

Private Swimming Lessons      Circle One:      Youth      Adult

Today's Date \_\_\_\_\_

Participant's Name \_\_\_\_\_

Child's Age \_\_\_\_\_ Parent's Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

**I would like lessons set up (check one)**

\_\_\_\_\_ ASAP      \_\_\_\_\_ Next Session      Other \_\_\_\_\_  
list specific date to start

Instructor Preference \_\_\_\_\_

Days and Times that are Best \_\_\_\_\_

Has the swimmer ever had lessons before?    \_\_\_\_\_ Yes    \_\_\_\_\_ No

If so, what level? \_\_\_\_\_

What is the swimmers current swimming ability? \_\_\_\_\_

**Anne or Jane will call to set up the lesson.**

**Please staple a copy of receipt to the back of this form and put it in Anne's mailbox.**

**Thank You**

Initial Contact - Date/Initials \_\_\_\_\_ Date we will confirm with swimmer \_\_\_\_\_

Instructor \_\_\_\_\_ Start Date \_\_\_\_\_ Day/Time \_\_\_\_\_

Confirmed with swimmer \_\_\_\_\_ Confirmed with instructor \_\_\_\_\_

Private Lesson Form Filled out \_\_\_\_\_