

Summer 2018 Child Swim Lessons Registration Form

(MUST fill out all information below)

Student's Name: _____ Age: _____ Level (ex: Level 2): _____

Parent Name (if under 18): _____ Phone #: _____

Email: _____ Date of Class Session: _____

(June 4-14, June 18-28 or June 4-30; July 2-12, July 16-26 or July 2-28; July 30-Aug 9 or July 30-Aug 25)

Status: WSU Student WSU Faculty/Staff Community Member

Type of Lesson: Children's Group – 8 lessons per session

Parent/Tot

Private – pay per lesson # of lessons: _____ 30 min: _____

Semi-Private – pay per lesson 60 min: _____

** 2 people must sign up at the same time*

*Circle at least 3 options for start time:

*Note, last class begins at 7:00pm

* All refunds will need to be directed to Tonya Blattner.

**Choosing an Italicized start time, please provide vehicle information for a free visitor parking pass.*

Mon - Thurs	Mon/Wed	Tues/Thurs	Sat
<i>3:00</i>	<i>3:00</i>	<i>3:00</i>	1:30
<i>3:30</i>	<i>3:30</i>	<i>3:30</i>	2:30
<i>4:00</i>	<i>4:00</i>	<i>4:00</i>	3:30
<i>4:30</i>	<i>4:30</i>	<i>4:30</i>	4:00
<i>5:00</i>	<i>5:00</i>	<i>5:00</i>	
5:30	5:30	5:30	
6:00	6:00	6:00	
6:30	6:30	6:30	
7:00	7:00	7:00	

*Monday through Thursday lessons for 2 weeks

*Monday/Wednesday or Tuesday/Thursday or

Saturday lessons for 4 weeks

Waiver on back must be signed →

For Office Use Only:

Payment type: Cash Credit/Debit Check

Amount: _____ Date: _____ Initials: _____ Receipt #: _____

Date Scanned: _____

Parking Information for Swim Lessons: 5 weeks maximum for a parking pass

Being part of the Swim Lesson Program at Wichita State University will cover a frequent visitor pass for all vehicles for each family in the program. Each time you pay for a new session please provide the Make, Model Style (SUV, Car, Truck etc.), and license plate information of the car.

Please be aware that each month we review and renew all current paying families for each new session. If you have not paid for the new session your frequent visitor pass will expire 3 days after the next session date begins.

1. Vehicle Make/Style (Car, Truck, SUV etc.): _____ Color:_____

Vehicle Model: _____ License Plate: _____

Address:_____

2. Vehicle Make/Style (Car, Truck, SUV etc.): _____ Color:_____

Vehicle Model: _____ License Plate: _____

Any Special Requests/Concerns

Waiver and Release Form

I/We, the parent/guardian of _____, (DOB respectively) _____

realize that his/her participation in swimming lessons is voluntary and involves certain risks that could result in injury to him/her.

I understand that the assistant instructors, although well qualified to teach my child swimming lessons, are not specifically trained as swim instructors.

With the above understanding I hereby declare that I will not hold Wichita Aqua Schocks and their agent Tonya Blattner, and the assistant instructors responsible or liable for any injury of damages my child may receive while participating in swim lessons. I further release Wichita Aqua Shocks and ther agent, Tonya Blattner, and assistant instructors any liability from any injury to my child while he/she is participating in swim lessons.

By signing this Waiver and Release, I hereby acknowledge that I have read and agree to comply with all of the above.

Date: _____

Parent/Guardian