Swim Lesson Registration

Choose Facility:

☐ Jim Parsley Center	Propstra Aquatic Center	
Vancouver School District Va	ancouver School District	Receipt #:
4100 Plomondon, Vancouver, WA 98661 60	05 N. Devine, Vancouver, WA 98661	Amount Pd. \$_
	60-313-3625	initials

PLEASE PRINT

Student Name:	Age:	Age:			
Parent/Guardian Name:					
Address:	e-mail:				
City:	State:	Zip:			
Home Phone:	Work Phone:				
Emergency Contact:	Emergency Phone:				

Pre-registration is **REQUIRED** on ALL swim lessons. You are able to register on the first day of lessons if space is available (not applicable to private lessons.)

No make-ups or refunds for missed classes due to the pools on-going schedule.

The above named student has my permission to participate in the activities listed on this registration form. In an emergency if I can't be reached, I grant my permission for emergency medical treatment to be given to said student. I assume all risks and hazards incidental to such participation including transportation to and from activities. I also allow photographs taken during Vancouver School District activities to be used in the promotion of future District programs. I have attached information regarding allergies, medical conditions or other information about my child which staff should be aware of.

Signature:

Date:

For office use only

If you or your child has a disability requiring accommodation, please call 313-1060.

Lesson / Class	Days	Time	Session	Session Dates	Fee	receipt #
					\$	
					\$	
					\$	
					\$	
					\$	
	-				\$	
				Total \$		

Fees include all applicable taxes.

* Cash or Check only. Make checks payable to the Vancouver School District.