



# Private Swimming Lessons Activity Registration



Guardian Last Name		Guardian First Name	
Address ( ) ( )		City ( )	Zip ( )
Home Phone	Cell Phone	Work Phone	Emergency Phone
Visa MC	Email:		
Cash Check	Check # :	Received by:	

### Participant Information

Participant First Name	Participant Last Name	DOB	Gender	Activity #	FEE
		/ /	M / F		
		/ /	M / F		
		/ /	M / F		
		/ /	M / F		

Participant Release Total Fees: \_\_\_\_\_

I, the below signed as adult (or the parent), do hereby release the City of Delta, its agents or employees, from liability for injuries or damages which may result to myself (my child) as a result of the participation of myself (my child) in the City of Delta Recreation Program. Further, the applicant agrees to save and hold harmless the City of Delta, its officers, agents, or employees, for any damages or personal injury which may result from these activities.

Signature Date

√	Description	Dates	Times	Days	Activity #	FEE
	Private Lessons	January	TBD	TBD	116 8A	\$75.00
	Private Lessons	February	TBD	TBD	116 8B	\$75.00
	Private Lessons	March	TBD	TBD	116 8C	\$75.00
	Private Lessons	April	TBD	TBD	116 8D	\$75.00
	Private Lessons	May	TBD	TBD	116 8E	\$75.00
	Private Lessons	June	TBD	TBD	116 8F	\$75.00
	Private Lessons	July	TBD	TBD	116 8G	\$75.00
	Private Lessons	August	TBD	TBD	116 8H	\$75.00
	Private Lessons	September	TBD	TBD	116 8i	\$75.00
	Private Lessons	October	TBD	TBD	116 8J	\$75.00
	Private Lessons	November	TBD	TBD	116 8K	\$75.00
	Private Lessons	December	TBD	TBD	116 8L	\$75.00