

## *Tega Cay Beach & Swim Center 2009*

### **Swimming Lessons Registration**

Personal Information					
Last Name:		First:		DOB:	
Address:		City:		Age:	
E-mail:		St:		Zip:	
Father:		Phone #:		Date:	
Mother:		Cell #:			

*(Please choose one in each group :)*

Session	
I (June 9 <sup>th</sup> -June 18 <sup>th</sup> )	
II (June 23 <sup>rd</sup> -July 2 <sup>nd</sup> )	
III (July 7 <sup>th</sup> -July 16 <sup>th</sup> )	
IV (July 21 <sup>st</sup> -July 30 <sup>th</sup> )	
V (Aug 4 <sup>th</sup> - Aug 13 <sup>th</sup> )	

Time	
8:30am – 9:00am	
9:00am -9:30am	
10:00 am – 10:30 am	

*(Please check one in each box below :)*

Level 1	Level 2	Level 3

Semi-Private	Private	Group Lessons

**\*\* By signing here I understand that my child is participating in a Tega Cay Program. I agree that I will not enter myself, or my child, in any program unless we are medically able, and understand the hazards that go along with swimming lessons. I assume all risk, on behalf of my child, associated with participating in swimming lessons. Having read and signed this registration form, I hereby release the Tega Cay Beach & Swim Center staff, instructors and volunteers from any and all claims and/or liabilities of any kind that may arise while my child is participating in any of its programs.**

Parent/Guardian Name (please print):		Date:
Parent/Guardian Signature:		

**Make checks payable to: Tega Cay B & SC**

**Registration Fee:** \_\_\_\_\_

**Check #:** \_\_\_\_\_