

## Beaver Lake Swim Lesson Registration

	Swimmer's Name:		Age	e:
0820	Responsible Adult Name:			
_ot #:	Address:			
City, State &	Zip:			
hone Num	ber:			
	contact cell number, if different tl			
mail:				
•	rticipant have any medical condit uffers from seizures)? Circle YES c			•
My swimmer	took lessons at BLA last season.	YesNo		
Please estima	ate your swimmer's current skills and	l abilities by answering the	following questi	ons.
Vill your swimmer independently go into the water (2-4 foot)?			YesNo	
s your swimmer comfortable submerging face into the water?			YesNo	
Vill your swimmer go underwater voluntarily?			Yes No	
Can your swimmer front and/or back float?				 Back
Can your swimmer front and/or back swim a short distance on own?				 Back
Will your swimmer independently go into the water (5-10 foot)?			YesNo	
Can your swimmer swim across the pool on their own?			YesNo_	
Can your swimmer go off the diving board?			YesNo	
Can your swimmer dive from the side of the pool?			YesNo	
Can your swimmer swim underwater?			YesNo	
Are you interested in private swim lessons with one of our lifeguards?			YesNo	
Select date(s)	and time(s) for 45-minute BLA grou	p lesson(s):		
	L0 – 149:00 am or _			
June 2	24 - 289:00 am or _	10:00 am		
July 8	– 129:00 am or _	10:00 am		
missed lesso be make-up	p lessons is \$40 per week. Payme ons, no shows or if your swimmer lessons. You may cancel up to tw of the class. Final cancellation da	is not willing to participo weeks prior to lesson	oate once class s s without a cand	starts. There will no
	Beaver Lake Association assumes or loss or damage to personal pro		e safety of any ι	users of the pool or
Parent/Guai	rdian Signature:		Date:	