



# Swimming Lesson Registration Form

Please fill out this form after reading the Swimming Lesson Parent Info. Packet. If you have any questions please call us at the Aquatic Center at 850-884-6866. Required fields are marked with an asterisk.

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## Swimmer Information

First name

Last name

Date of birth

Age

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## Address Information

Street address

Street address line 2

City

Postal zip code

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## Parent's Information (if participant is under 18)

Parent's/Guardian's name

Phone number

Work number

Email address

### **Emergency Contact 1**

In the event of an emergency, please contact:

First name

Last name

Primary phone number

Secondary phone number

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Additional notes

(Please designate which level would be best suitable for your child. Please list anything we need to know your child. Ie: Learning or physical disabilities, allergies, or restrictions. Also, please list any time/ instructor preferences you may have here.)

Date:

Parent Signature:

I have read and understand the Swimming Lesson Parent Information Packet. I have filled out a Hold Harmless Agreement form for each of my student/s. The Hurlburt Field Aquatic Center has received my payment in order to reserve my child's slot on the Swimming Lesson Roster.