

# 2019 OAKES POOL

## PRE-SCHOOL

### SWIMMING LESSONS REGISTRATION

Any Changes Will Be Posted  
At The Pool and On Facebook Page

\$25.00

**\*\*Days & Time May Change Due to Instructor Availability\*\***

**\*\*AGES 2 1/2 - 5 YEARS OLD\*\***

**\*\*8 STUDENTS PER LEVEL\*\***

SESSION & TENTATIVE DATES: (circle)

Session # 1 (2-3 year olds)

July 7 - July 11 \* 5:00 - 5:30

Session # 2 (4-5 year olds)

July 7 - July 11 \* 5:30 - 6:00

Session # 3 (2-3 year olds)

July 14 - July 18 \* 5:00 - 5:30

Session # 4 (4-5 year olds)

July 14 - July 18 \* 5:30 - 6:00

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### Consent for Medical Treatment and Participation:

I, the undersigned, hereby authorize first aid, medication and/or medical treatment deemed necessary in case of an emergency for the above-named student, a participant in the swimming program at the Oakes Public Swimming Pool. I understand that I will be responsible for any expense incurred on his/her behalf in connection with such treatment. I also authorize the program appointed authority to execute on my behalf any permission slips and other appropriate documents and act on my behalf if I am not immediately available to do so.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\*\*\*\*\*Office Use Only\*\*\*\*\*

Date Paid: \_\_\_\_\_ Total: \$ \_\_\_\_\_

(\$25)

BY: \_\_\_\_\_