

VAN BUREN SWIM INSTRUCTION

CHILD'S NAME: _____ AGE: _____

ADDRESS: _____ CITY: _____ STATE _____ ZIP _____

PHONE NUMBER - DAY: _____ EVENING: _____

PLEASE CIRCLE YOUR CHOICE OF CLASS

SESSION III July 14 – July 25, 2025		SESSION IV July 28 - August 8, 2025	
6:30-7:00pm	TURTLE TOT	6:30-7:00pm	TURTLE TOT
6:30-7:10pm	LEV. 2, LEV.3	6:30-7:10pm	LEV.2, LEV.3
7:15-7:45pm	LEV. 1	7:15-7:45pm	<u>LEV. 1</u>
7:15-7:55pm	LEV. 3, LEV. 5	7:00-8:00pm	LEV. 6

REFUND POLICY: Refunds (minus a \$10.00 administrative fee for one cancellation) for swimming lessons will be given up until the third class of a particular session **HAS BEGUN, regardless of whether the child has attended the first two!** If your child is not willing to stay in the program at the end of the second class, please stop by our office **before you return home that day and request a refund!** Once the third class has **STARTED**, there will be **NO** refunds given, for any reason. Lessons are run on a self-sustaining basis; enough children must register to cover the costs of running a class or it will be cancelled. If a class is cancelled due to insufficient enrollment, then class fees will be fully refunded. **This department reserves the right to cancel or combine classes if necessary.**

I AM AWARE OF THE INHERENT DANGERS INVOLVED IN SWIMMING ACTIVITIES AND WARRANT THAT MY CHILD IS IN GOOD PHYSICAL CONDITION. I UNDERSTAND THAT NO MEDICAL INSURANCE IS INCLUDED AS A PART OF THIS PROGRAM AND WILL NOT HOLD THE TOWN OF VAN BUREN LIABLE FOR ANY INJURY ARISING OUT OF PARTICIPATION IN THE PROGRAM.

I DO HEREBY GIVE MY CHILD PERMISSION TO PARTICIPATE.

PARENT'S SIGNATURE: _____

[illegible]

FEE: _____ RECEIPT NUMBER: _____ DATE: _____

RESIDENT _____ (\$60.00/session) NON-RESIDENT _____ (\$65.00/session)