

Summer 2023 ~Semi-Private Lesson Registration Form ~

	Date of Birth:	Circle One: M F
Swimmer's Name:		
Swimmer's Name: Age at time of Lessons:	Date of Birth:	Circle One: M F
Lessons can be booked be	etween 9-11:30 & 3:3	30-6 Monday – Thursday
To Book Lessons E	mail: <u>Linda@swim</u> s	<u>smartvictoria.com</u>
Te	xt or Call: 361/676-54	43
Payment: Elec	tronic through Zelle 3	61/676-5443.
Cash, Check	or Money Order drop	o off or mail
Swim Smart Victori	ia 309 Lantana Ave Vic	ctoria, Texas 77901
Contact Name		
Address:		
City Zip Code _		
Home Phone:Cell Phone		
E-mail Address:		
List Scheduled Dates and Times:		
Tell us about the student's swimming abilities, including comfort level in the water		or bad), special needs and/or limitations and
What swim skills would you or the student like to accommer?		
Swim Smart teaches progressive swim skills at every somall class size allows us the opportunity to work with and learn as they watch each other practice the skills basics and progressively work up to the more advance introduced skills at his/her own pace according to his	n each child on his/her skill being introduced. Every cl ed swim skills. Keep in min	I level. The students will be encouraged, motivated lass, no matter what age group will start with the nd each child is different and will master the
Semi-Private Le	essons with Linda B	Brown \$120/hr.
Daid Amount: Talla	Cash	Check #

No refunds or credit will be given for cancelled lessons. Make ups will be scheduled only for cancellations due to bad weather and at the instructor's discretion.

If students are not of the same family each party is required to submit a liability waiver before the first lesson.

Swim Smart Victoria

Waiver/ Release RELEASE OF LIABILITY FOR MINOR & ADULT PARTICIPANTS READ BEFORE SIGNING

IN CONSIDERATION OF	, myself, or my child/ward, being allowed to unami Swim Team related events and activities, the
1. The risk of injury to my child/ward from the activities i including the potential for permanent disability and death, personal discipline may reduce this risk, the risk of seriou	, and while particular rules, equipment, and
2. I FOR MYSELF, SPOUSE, AND CHILD/WARD, I K SUCH RISKS, both known and unknown, EVEN IF ARIS RELEASEES or others, and assume full responsibility for	SING FROM THE NEGLIGENCE OF THE
3. I willingly agree to comply with the program's stated as participation. If I observe any unusual significant concern and/or in the program itself, I will remove myself, or my of the nearest official immediately; and,	in my child/ward's readiness for participation
4. I for myself, my spouse, my child/ward, and on behalf of and next of kin, HEREBY RELEASE AND HOLD HARD its directors, officers, officials, agents, employees, volunts sponsors, advertisers, and if applicable, owners and lessor ("Releasees"), WITH RESPECT TO ANY AND ALL IN. damage to person or property incident to my child/ward's WHETHER ARISING FROM THE NEGLIGENCE OF To fullest extent permitted by law.	MLESS Swim Smart Lessons or Tsunami Swim Team; eers, other participants, sponsoring agencies, as of premises used to conduct the event JURY, DISABILITY, DEATH, or loss or involvement or participation in these programs,
5. I, for myself, my spouse, my child's/ward, and on beharepresentatives and next of kin, HEREBY INDEMNIFY A Releasees from any and all liabilities incident to my child programs, EVEN IF ARISING FROM THEIR NEGLIGE	AND HOLD HARMLESS all the above 's/ward's involvement or participation in these
I HAVE READ THIS RELEASE OF LIABILITY AND UNDERSTAND ITS TERMS, UNDERSTAND THAT SIGNING IT, AND SIGN IT FREELY AND VOLUNT	I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY
(SELF, PARENT/GUARDIAN SIGNATURE)	(PRINT NAME)
Date Signed:	
UNDERSTA I understand the seriousness of the risks involved in partic for adhering to rules and regulation, and accept them as a	
(PARTICIPANT SIGNATURE)	(PRINT NAME)

Date Signed: _____