**Water Safety/Swimming Lessons Registration Form**

***Session 1*** *OR* ***Session 2***

**June 17 - June 28, 2024 July 1 - 12, 2024**

***Levels***

***Level 1-6*   *Pre-school***

**9:00 am - 9:45 am 9:15am - 9:45am**

**10:00 am - 10:45 am 10:15 am - 10:45 am(1st session ONLY)**

**11:00 am - 11:45 am 11:15 am - 11:45 am**

***PLEASE NOTE***

Preschool swimmers must be at least 3 years old and potty trained in order to participate in swimming lessons. Preschool sessions are limited to the first 10 in each time slot.

Minimum age for Level 1 is 6 years old or the completion of kindergarten.

Parents **are not** allowed on the pool deck or in the lobby during lessons.

You may watch from the fence area on Memorial Drive.

***Pricing***

Preregistration: **$25.00**

Registration on the first day of lessons: **$35.00**

***(cut here) (cut here)***

**Return to City Clerk’s office, 225 Market Street, 1st floor Sunbury, PA 17801**

**All Checks/Money Orders should be made out to the City of Sunbury /Swim Lesson**

**SWIMMER’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TELEPHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**AG AGE\_\_\_\_\_\_\_\_\_\_\_ LEVEL COMPLETED\_\_\_\_\_\_\_\_\_\_ SCHOOL GRADE \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DOES YOUR CHILD HAVE ANY SPECIAL NEEDS THE INSTRUCTORS SHOULD BE AWARE OF?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I understand my child will participate in the Water Safety program under qualified supervision. I hereby give my consent for the above-named child to participate in the Water Safety program directed by the City of Sunbury.

My child will be attending: (circle your choice) ***Session 1*** OR ***Session 2*** Times (circle times requested): **9:00 - 9:45 am**  **10:00 - 10:45 am 11:00 - 11:45 am** *Pre-school sessions:* ***Session 1***  *OR* ***Session 2***

Times(circle one ) : **9:15 - 9:45 am** **10:15 - 10:45 am** ( available for 1st session only) **11:15 - 11:45 am**

AMOUNT ENCLOSED\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of parent/guardian Print name Date