



Summer Group Swimming Lessons

Child Name: _____ Age: _____ DOB: _____ Teacher/Grade: _____
Parent: _____ Cell: _____ Email: _____

Tuition:

\$200 per 2-week session

Class Information:

- (8) 45-minute lessons; with time slots from 9AM - 12PM
- Lessons are held Monday-Thursday for 2 consecutive weeks.
 - Dates may be adjusted to accommodate school holidays/closures
- 8:1 student/teacher ratio.
- Students must be at least 3-years old.**
- Students must be fully potty trained.**
- Students 3-years and younger must wear 2 reusable swim diapers under their swimsuit (regardless of potty-training status).**
- Placement is made on a first-come, first-serve basis.*



Staff Qualifications:

Our instructors and lifeguards are all certified by the American Red Cross and have many years of experience working with children of all ages and skill levels.

Make-up Class Policy:

Classes canceled due to weather or student illness will be made up on Fridays. Client withdrawal from any session must be submitted in writing to the school office **two weeks prior** to the start of the enrolled session. After that date, a doctor's note is required for credit toward future classes. Classes missed due to vacations, field trips or clinics will not be made up. No refunds.

Please rate your child's skills in the water (Use a check mark):

- | | | |
|---|---|---|
| <input type="checkbox"/> Fearful of the water | <input type="checkbox"/> Blows Bubbles | <input type="checkbox"/> Puts face in water |
| <input type="checkbox"/> Swims facedown | <input type="checkbox"/> Treads water | <input type="checkbox"/> Side Breathes |
| <input type="checkbox"/> Floats on back | <input type="checkbox"/> Ready for advanced strokes | <input type="checkbox"/> Ready for competition skills |

Please share anything that would help your child be more comfortable in the water:

Swim Sessions (Check all that apply.)

At least two sessions are recommended for swimmers under the age of 4. Sessions cannot be split.

<input type="checkbox"/> Session 1: May 20-23 & May 28-31[<i>off 5/27</i>]	<input type="checkbox"/> Session 3: June 17-21 & June 24-27[<i>off 6/19</i>]
<input type="checkbox"/> Session 2: June 3-6 & June 10-13	<input type="checkbox"/> Session 4: July 1-3 & July 8-12[<i>off 7/4-5</i>]
<input type="checkbox"/> Session 5: July 15-18 & July 22-25	

I understand the registration information provided. My child is in good health and may participate fully in swimming classes and related activities. I understand tuition is billed through Tuition Express or Brightwheel on the 1st of each month.

I understand that if I don't comply with the school's/Dallas Swim Lady's policies, my child will be removed from class without refund.

Parent Signature of Consent: _____ Date _____