2017

CHAMPAIGN FAMILY YMCA &
URBANA CITY POOL
689 Park Lane, Urbana, Ohio 43078
P: (937)653-6994

SWIM LESSON REGISTRATION FORM

Please fill out the following information on your child/children. This information will be used to start or update your child's file and for record-keeping and emergency situations.

Name(s), Ages and Level Preference: If multiple children are listed, all listed must live in the same household. Separate forms must be completed for different addresses.

	Name	Age	Level Preference
1.			
2.			
3.			
4.			
5.			
6.			

Address: _____
Street City

Phone: _____ Email (required): _____

Known Health Problems: _____

Session/Time of Preference: (circle)	SESSION 1	SESSION 2	SESSION 3
	AM: 10 10:30 11 11:30	AM: 10 10:30 11 11:30	AM: 10 10:30 11 11:30
	PM 7:15	PM 7:15	

I, the undersigned, acknowledge that participating in swimming lessons at the Urbana City Pool involves potential risks. The Champaign Family YMCA shall not be held liable for any claims, demands, injuries, damages, or actions arising from the use of the facilities. I hereby hold the Champaign Family YMCA and City of Urbana and its employees harmless from all claims or injuries which may occur.

Parent/Guardian Signature _____

OFFICE USE:

Season Pass Holder (circle one) YES NO Pass#: _____ FREE Session: _____ PAID 1: _____ PAID 2: _____

Manager Signature: _____