

New  Renew

Children's swim lesson registration

# Children's Swim Lessons

Swim-in Zone Inc.  
4355 Saucon Creek Rd Center Valley, PA 18034  
Phone 610-625-4848 www.swim-inzone.com

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Family Name \_\_\_\_\_ Parents' First Names \_\_\_\_\_

Full Address \_\_\_\_\_  
Number Street City/State/Zip

Phone \_\_\_\_\_  
Home Cell Work

Email \_\_\_\_\_ Emergency Contact \_\_\_\_\_

Nonrefundable **REG FEE** \_\_\_\_\_

I understand that withdrawal may be subject to a \$40 withdrawal fee per student. \_\_\_\_\_ Please initial

1) \_\_\_\_\_

Name	Age	GRADE	DOB	Gender
Check one	<input type="checkbox"/> Group COLOR/LEVEL			<input type="checkbox"/> Parent/Child Intro Inter Adv 2Little Older
	<input type="checkbox"/> Semiprivate			<input type="checkbox"/> Swim team Off to the Races DD
	<input type="checkbox"/> Private			

1st Choice of day and time range \_\_\_\_\_

2nd Choice of day and time range \_\_\_\_\_

**LESSON FEE** \_\_\_\_\_

1) \_\_\_\_\_

Name	Age	GRADE	DOB	Gender
Check one	<input type="checkbox"/> Group COLOR/LEVEL			<input type="checkbox"/> Parent/Child Intro Inter Adv 2Little Older
	<input type="checkbox"/> Semiprivate			<input type="checkbox"/> Swim team Off to the Races DD
	<input type="checkbox"/> Private			

1st Choice of day and time range \_\_\_\_\_

2nd Choice of day and time range \_\_\_\_\_

Referred by \_\_\_\_\_

**LESSON FEE** \_\_\_\_\_

Payment must accompany registration in order for classes to be scheduled

Make Check payable to **Swim-in Zone Inc**

Credit cards accepted are Mastercard/Visa/Discover \_\_\_\_\_  
exp \_\_\_\_\_

**TOTAL LESSONS** \_\_\_\_\_

*Half payment option:* I have paid for 1/2 of the balance due and understand that I am obligated to pay the 2nd half on the stated date that "2nd half payment is due". I owe this amount irrespective of the number of classes or make-ups attended prior to or subsequent to that date and that there is a \$5.00 service charge for this option.

Signed \_\_\_\_\_

+ 1/2 payment	\$5.00
<b>TOTAL DUE</b>	_____
<b>Today's PAYMENT</b>	_____
<b>BALANCE DUE</b>	_____

Office Use Only		
Summer____	___ Waiver signed	___ Add students into class
Fall____	___ Payment into register	___ Make Family folder
Winter____	___ Payment into computer	___ Level sheets
Spring____	___ Enter Family in Computer	___ File on Sue's Desk
SCHOOL YEAR ____	___ Read half payment option and withdrawal information	

front desk - forms- school year registration

**STAFF** \_\_\_\_\_