

TRENTON PARK POOL

Swim Lesson Registration Form

Child's First Name:		Last:		
Address:				
Age:	DOB:	Gender:	Swim Level:	
Indicate Any Me	edical Condition:			
Health Card Nu	mber:			
Parent/Guardia	n Information			
First Name		Last:		
Phone:		Email:		
Emergency Cor	ntact			
First Name:		Last:		
Phone: Relation		Relationship:		
Session Dates:	July 02 – July 12 July 15 – July 25 July 29 – August 09 August 12 – August 22	;	Swim Pre-School Swim Kids 1-4 Swim Kids 5-10	\$70.00 \$70.00 \$80.00