

PRIVATE SWIM LESSONS REQUEST FORM

PARKVIEW WARSAW YMCA

Date _____

	SE CIRCLE WHICH TYPE OF LESSON YOUR ARE INTERESTED IN: TICIPANT:	
	Option 1—-Four 30 minute lessons (Member: \$75 Guest: \$110)	
	Option 2 —Seven 30 minute lessons (Member: \$130 Guest: \$190)	
2 PAR	TICIPANTS:	
	Option 1 —Four 30 minute lessons (Member: \$57 Guest: \$83) per participant	
	Option 2 —Seven 30 minute lessons (Member: \$98 Guest: \$143) per participant	
3 PAR	TICIPANTS:	
	Option 1 —Four 30 minute lessons (Member: \$38 Guest: \$55) per participant	
	Option 2 —Seven 30 minute lessons (Member: \$66 Guest: \$96) per participant	
*For 2 aı	d 3 participant lessons the YMCA does not pair you. You must sign up together. Discounts do not apply to Private Lessons.	
PART	CIPANT 1: MEMBER / GUEST (CIRCLE ONE)	
Name		
DOB _	Current Age	
Parent	/ Guardian Name:	
Phone	Text: Y /	Ν
Email		
Home	Address	
City _	Zip	
Please	describe participant's current swimming ability and goals for improvement, apprehensions, fear of water	·
Will th	e participant need inclusive support: Yes No	
PART	CIPANT 2: MEMBER / GUEST (CIRCLE ONE)	
Name		
	Current Age	
Parent	/ Guardian Name:	
	Text: Y /	Ν

Email			
City	Zip		
	entswimming ability and goals for improvement, apprehensions, fear of water.		
Will the participant need inclusiv	ve support: Yes No		
PARTICIPANT 3: MEMBER / G	GUEST (CIRCLE ONE)		
Name			
	Current Age		
Parent / Guardian Name:			
Phone	Text: Y / N		
Email			
City	Zip		
Please describe participant's curre	entswimming ability and goals for improvement, apprehensions, fear of water		
Instructor Preference (if any)			
Will the participant need inclusiv	e support: Yes No		

PLEASE INDICATE ALL TIMES YOU ARE AVAILABLE FOR LESSONS.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
8:00 AM - 12:00 PM					
4:00 PM - 5:00 PM	12:00 PM - 3:00 PM				
5:00 PM - 7:30 PM	5:00 PM - 6:30 PM	N/A			

^{*}The times listed above reflect the best availability of our pool space. There is no guarantee that instructors are available during the times listed. Some private lessons can be scheduled during public lessons if instructors are available. While every effort will be made to find an instructor during the times you request, we are unable to guarantee all requested times. Thank you for your understanding.

Thank you for your interest in private swim lessons. Fill out this form, and our Aquatics Team will get be in touch with you to finalize your registration. Please note this is only a request form. Submission of this form does not guarantee lessons. Due to pool schedule and instructor availability, lessons are not always immediately available. You will be contacted by the Aquatics Director or Lesson Coordinator who will work to schedule and instructor who can meet your request.

Payment is not due until you have arranged a lesson time with an instructor. You will be contacted when an instructor becomes available to meet your needs. Lesson times will be set up with the instructor.

Please bring proof of payment to the first lesson. Private lessons must be paid for at the member services desk prior to coming to the pool deck. Please show receipt to the instructor so they may record the receipt number for our records.

These lessons are 30 minutes long. Private lessons are one on one. Semi-Private lessons are two or three students with the same swimming ability and one instructor. Lessons can start at any time, however the instructors do have commitments to group lessons and we do our best to get them as close to your request. Class days and times will vary based on availability of staff and pool schedule.

Any age or ability can sign up for these lessons. Our staff can work with toddlers up to adults, beginners to the technically advanced, participants with diverse abilities and more.

PARTICIPATION WAIVER:

In consideration of my participation in the activities of the Parkview Warsaw YMCA, I do hereby agree to hold free from any and all liability the YMCA and its respective officers, employees, and members and do hereby from myself, my heir, executors, and administrators, waive, release and forever discharge any and all rights and claims for damages which I may have or which may hereinafter accrue to me arising out of or connected with my participation in any of the activities of the Parkview Warsaw YMCA. I do hereby declare myself and /or child to be physically sound, having medical approval to participate in the activities of the Parkview Warsaw YMCA.

Parent/Legal Guardian Signature	
Date:	