

**Arthur & Gloria Muselman Wellness Pavilion/Swiss Village, Inc.
Group Swim Lesson Registration Form**

**Month:
October 2022**

Today's date: _____
 Participant's name: _____ Age _____ DOB: _____ Sex: M F
 Participant's name: _____ Age: _____ DOB: _____ Sex: M F
 Participant's name: _____ Age: _____ DOB: _____ Sex: M F
 Parent/Guardian Name: _____ Email address: _____
 Address: _____
 Contact Phone: _____ Alternate Phone: _____
 Emergency Contact: _____ Phone: _____ Relationship: _____
 Emergency Contact: _____ Phone: _____ Relationship: _____

	YES	NO
Previous swim lesson experience?		
Comfortable in water?		
Feels comfortable putting head underwater?		
Can swim independently without floatation?		
Do you or your child have any health issues such as asthma, epilepsy, or physical disabilities that could affect you or your child's safety while exercising in the water? If yes, please explain on the back of this form.		

Please indicate which lessons that the participant(s) will be signing up for:
 Preschool (must be 3 years of age) 10:10-10:55am, October 3-5, 17-18, 24-25, 2022
 Adult Beginner 10:15-11:00am, October 4,6, 11,13, 18, 25, & 27, 2022

Fees

Group Swim Lessons (5:1 Student/Instructor Ratio for Preschool, LTS, and Adult or 8:1 Student/Instructor Ratio for Parent-Tot)

- | | |
|---|---|
| <i>Members</i> | <i>Non-members</i> |
| <input type="checkbox"/> 7, 45-minute lessons/participant - \$40* | <input type="checkbox"/> 7, 45-minute lessons/participant - \$50* |

OFFICE USE ONLY: _____ (# of participants) x \$ _____ (amount above) = \$ _____ (Total Due)

Payment method: Cash Check, Check #: _____

*Payment in the form of cash or check is due at the time of registration. Please make check payable to Swiss Village, Inc. If you have questions or would like more information, contact Briana Eicher or Marie Nussbaum at 260-589-4496.

Release of Liability **PLEASE READ CAREFULLY**

By my signature below, I hereby give permission for me and/or my son/daughter to participate in swim lessons. I agree and understand that this activity is hazardous and recognize that there are risks inherent to the activity that could lead to serious injury, including but not limited to slipping on wet decks, paralyzing injuries and death, and I assume all risk for any such injury or death. As a condition of participation in the above-described activity, I agree to waive all claims against the Arthur & Gloria Muselman Wellness Pavilion/Swiss Village, Inc. and to indemnify and hold the Arthur & Gloria Muselman Wellness Pavilion/Swiss Village, Inc., its Board, officers, agents, and employees harmless from any and all liability claims, demands, losses, causes of action, suits or judgments of any kind whatsoever. In the event of illness or injury, I do hereby consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis, treatment, hospital care, and/or medical transportation considered necessary in the best judgement of the attending physician, surgeon, or dentist. Further, I agree to pay all costs associated with the treatment, medical care and transportation. I have noted any medical/health problems that the staff should be aware of. I also understand that registration in this program constitutes permission to the Arthur & Gloria Muselman Wellness Pavilion/Swiss Village, Inc to use photos and I have carefully read the above liability release and sign it with full knowledge of its contents and significance.

Group Swim Lesson Policies

I have read and understand the Group Swim Lesson Policies and will abide by these for the term of the swim lesson package.

 Participant/Parent/Guardian Signature _____ Print Name _____ Date