

**Rowan University Rec Center Swim Lessons**  
**REGISTRATION FORM & INFO SHEET FALL 2009, SESSION 1**  
**October 4<sup>th</sup> – November 1<sup>st</sup> Registration Deadline: September 19<sup>th</sup>**

Name of Child \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ Cell \_\_\_\_\_

Email Address \_\_\_\_\_

**Type:**

Private (member - \$100) \_\_\_\_\_ Private (non-member - \$110) \_\_\_\_\_

Group Lessons (member - \$75) \_\_\_\_\_ Group Lessons (non-member - \$85) \_\_\_\_\_

Please note: The Rec Center cannot guarantee the placement of your child with the requested child(ren).

Enroll this student with (*group lessons only*) \_\_\_\_\_

**Ability Level (Ages 3 and up):**

Beginner \_\_\_\_\_ Intermediate \_\_\_\_\_ Advanced \_\_\_\_\_

Describe some of the swim skills you child possess:

What do you want to see your child be able to accomplish after these swim lessons?

Availability for Private Lessons (Ages 3 and up) and Group Lessons (Ages 5 and up):

Please check **AT LEAST FIVE TIMES THAT YOU ARE AVAILABLE** to attend swim lessons on Sundays:

9:00AM \_\_\_\_\_ 9:45AM \_\_\_\_\_ 10:30AM \_\_\_\_\_ 11:15AM \_\_\_\_\_

12:00PM \_\_\_\_\_ 12:45PM \_\_\_\_\_ 1:30PM \_\_\_\_\_ 2:15PM \_\_\_\_\_

3:00PM \_\_\_\_\_ 3:45PM \_\_\_\_\_ 4:30PM \_\_\_\_\_ 5:15PM \_\_\_\_\_

**\*Please be advised that we can no longer accept children under the age of 5 to participate in Group Lessons. Children 3 and 4 years of age must sign up for private lessons for their and the instructor's safety in getting the children acquainted with the water.**

**\*\*Failure to list five times available for lessons will result in the registration form being returned. We will make all attempts to accommodate your requests for time and instructor; however we cannot guarantee times and instructors based on availability. There will not be able to any makeup lessons so please ensure that your child is available to attend all lessons.**

**\*\*\*Registration Forms will be received and priority given on a first come first basis and there is a cap on registrations.**

RELEASE: In consideration of the acceptance of my entry, I, intending to be legally bound hereby for myself, my heirs, executors, administrators, and assignees, waive and release any and all rights I may have against Rowan University and other officials, contributors, and organizers, volunteers, and other parties associated with this program from and against any blame and liability for any and all injuries received by me as a result of the swimming lessons program. I attest and verify that I have full knowledge of the risks involved and I am physically fit and sufficiently trained to participate in this program. I also consent to the taking of photographs, slides, motion picture, video tapes, and sound recordings for current and future promotional and instructional purposes of my child.

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Parent or Guardian (please print): \_\_\_\_\_

**Mailing Address:**

Rowan University Recreation Center  
Attn: Swim Lessons  
201 Mullica Hill Rd.  
Glassboro, NJ 08028

**Make Checks Payable to:**

Rowan University