



SWIMMING LESSONS REGISTRATION

Session	Register in ✓
July 6 – July 17	
July 20 – July 31	

Emergency Contact Information

Parent/Guardian Name	Telephone Number	Email

Child Name:	Date of birth:
Address:	
Health Card Number:	
Allergies/Medical Information:	
Last Level Passed:	

Swim Class	Level	Resident	Non-Resident
Parent and Tot (1, 2, 3)		\$45.00	\$65.00
Preschool (A, B, C, D)		\$45.00	\$65.00
Swimmer (1, 2)		\$45.00	\$65.00
Swimmer (3, 4, 5, 6)		\$55.00	\$75.00
Rookie/Ranger/Star		\$65.00	\$85.00
Bronze Star/Medallion/Cross + Exam and manual fee	Class to be determined – based on interest.		

I, the Participant or Parent/Guardian, desire to take part in Swim Lessons and/or other aquatic programs conducted at the Earleton swimming pool. I am aware that engaging in these activities carries inherent risks, including the potential for physical harm, loss of life, or damage to property. I acknowledge and consent that I/my child have/has chosen to participate willingly, understanding the associated risks. I confirm that neither I nor my child have any known physical or medical conditions that would impede our ability to take part.

In exchange for the privilege of participating in the aforementioned activities, I hereby release and absolve the Township of Armstrong, along with all of their employees, volunteers, officers, and representatives ("Releasees"), from any and all claims concerning personal injury, death, or property damage that may arise due to or in connection with my/my child's involvement in these activities. This release of liability shall not apply in situations where such harm is the direct result of intentional misconduct or severe negligence on the part of the Releasees.

By signing this waiver, I affirm that I have read and understand it and agree with its contents.

Parent/Guardian Signature: _____ Date: _____

For Parents/Guardians of minor participants only: PLEASE INITIAL HERE _____

As the minor's parent/guardian, I hereby consent to his/her participation in the activity. If my child is injured or becomes ill and neither I nor the other parent/guardian can be reached at the provided numbers, I give the Township of Armstrong (Earleton Swimming pool) permission to seek medical attention for my child.