

Diver Dan's Swim School – Registration Form

Swimmer Information

| | |
|------------------|------------------|
| Name of Swimmer: | Name of Parent: |
| Address | City, State, Zip |
| Home Phone: | Work Phone: |
| Cell Phone: | e-mail address: |
| Birthday: | Age: |

| |
|---|
| Name of Person who Referred you to <i>Diver Dan's</i> : |
|---|

Type of Lessons

| | | |
|---|---|--|
| <input type="checkbox"/> Private Lessons | <input type="checkbox"/> Semi-Private Lessons | <input type="checkbox"/> Group Lessons |
| <input type="checkbox"/> Nemo Class (Private) | <input type="checkbox"/> Water Babies Class | <input type="checkbox"/> Other _____ |

Scheduled Dates of Classes

| # | Date | Time | Instructor | # | Date | Time | Instructor |
|---|------|------|------------|----|------|------|------------|
| 1 | | | | 6 | | | |
| 2 | | | | 7 | | | |
| 3 | | | | 8 | | | |
| 4 | | | | 9 | | | |
| 5 | | | | 10 | | | |
| * | | | | * | | | |

* Make-Up Class (Two make-up lessons are allowed with less than 7-day notice)

Referral Lessons (FREE!)

| # | Date | Time | Instructor | # | Date | Time | Instructor |
|---|------|------|------------|---|------|------|------------|
| | | | | | | | |

Please use the back of this form for *Special Needs / Notes*

| | |
|--------------------------|------------------|
| For Diver Dan's Use Only | |
| Date of Invoice: _____ | Invoice #: _____ |



