

MIDNIGHT SUN COMPLEX – SWIMMING LESSON REGISTRATION FALL SESSION 2 – WEDNESDAYS AND FRIDAYS NOVEMBER 15 – DECEMBER 15, 2017

Please Print					
Participant's Name:		Birth Date (m/d/y)	:		
Address:					
Name of Parent/Guardian	:				
Work Phone:	Cell Phone: Em		il:		
Health Card Number:	Emergency Contac	t:	Phone:		
Medical History/Allergies:					
PLEASE NOTE: R	REGISTRATION SPACES ARE LIMITED A	AND ARE ON A FIRST COME	/FIRST PAID BASI		
	CHECK THE LEVEL IN WHICH YOU WO				
<u>5:00 – 5:45 p.m.</u> <u>\$</u>	73.50 <u>Swimmer 4</u>	<u>Swimmer 5</u>	Swimme	<u>: 6</u>	
<u>6:00 – 6:30 p.m.</u> \$	63.00 Pre-School 3	Pre-School 4			
<u>6:00 – 6:30 p.m.</u> \$	63.00 Swimmer 2	Swimmer 3			
<u>6:30 – 7:00 p.m.</u> \$	63.00 Pre-School 5	Swimmer 1			
6:30 – 7:00 p.m. \$	63.00 <u>Pre-School 1</u>	Pre-School 2			
Ren	noval of Parent & Tot swim from Less	sons (effective October 5 th ,	2016)		
•	the best possible learning environme	nt for our students the Pare	ent & Tot swim is	no longer	
_	5:00-7:00 time slot.				
Anyone not in lesso	ons MUST stay behind the roped off o	bservation area AT ALL TIM	ES.		
		Parent/G	uardian Initials _		
Parent/Guardian Signature	۵۰	Cost:			
Turenty Guardian Signature.	··		Cash	Debit	
		Type of Payment:	Visa	MC	
PAGG GLASS GLASS		Paid in Full:			
MSC Staff Signature:			staff signature		
PLEASE NOTE	: NO REFUNDS WILL BE GIVEN UNL	ESS ACCOMPANIED BY Δ D	OCTOR'S NOTE		
- 1-1-10-1-19 -1	IN WHICH CASE A PRO-RATED RE				