



201 E. Carroll Gibson Blvd.  
Leitchfield, KY 42754  
270-259-4420

# Learn-To-Swim

### Group/Private Session:

Session 1: June 6 <sup>th</sup> -9 <sup>th</sup>	9:00-9:45am
Session 2: June 13 <sup>th</sup> -16 <sup>th</sup>	7:15-7:45pm
Session 3: June 20 <sup>th</sup> -23 <sup>rd</sup>	9:00-9:45am
Session 4: June 27 <sup>th</sup> -30 <sup>th</sup>	7:15-7:45pm
Session 5: July 6 <sup>th</sup> -9 <sup>th</sup>	9:00-9:45am
Session 6: July 11 <sup>th</sup> -14 <sup>th</sup>	7:15-7:45pm
Session 7: July 18 <sup>th</sup> -21 <sup>st</sup>	9:00-9:45am

**\*\*Please circle the session you would like to enroll the child in\*\***

Private lessons are taught upon request at the same date/time, with a one-on-one instructor.

### Price:

Group Session (4 lessons = 1 session) costs \$50

Private Session (4 lessons = 1 session) cost \$75

Children must be at least **2 years of age** to be enrolled in our learn-to-swim program, and any child under the age of 4 is required to enroll in the mommy and me class.

*You will receive a \$10 discount (off your total) if you are enrolling more than one child in our program.*

### Important Information

If you choose to cancel your lesson or do not show up for them, it is not the instructor's responsibility to make up your lesson. The aquatic center is also not responsible for refunds. If we cancel lessons due to the weather, we will make arrangements to make the lesson up. We will not give out refunds.

Participant's name: \_\_\_\_\_ Age: \_\_\_\_\_

Guardian name: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**\*\*By signing below, you are stating that you have read over the information sheet and agree with everything on it. \*\***

The person responsible for the group has read the center guidelines and reservation information. The undersigned agrees to indemnify and hold harmless the City of Leitchfield and their agents and employees from and against all claims, damages, losses and expenses of any nature or description arising out of the use of the premises by any person whatsoever.

Guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

MAKE CHECKS PAYABLE TO LEITCHFIELD AQUATIC CENTER  
PLEASE BRING FORMS AND PAYMENT TO PARKS AND REC AT CITY HALL UNTIL MAY 20<sup>TH</sup>,  
AFTER MAY 28<sup>TH</sup> TAKE TO THE LEITCHFIELD AQUATIC CENTER TO RESERVE YOUR SPOT.  
OR MAIL IN YOUR FORM TO PARKS & REC, P.O. BOX 398, LEITCHFIELD KY 42755

If your child participated in Learn to Swim last year what was the last level they completed? \_\_\_\_\_

### To be filled out by staff:

Swim session: \_\_\_\_\_ Group/Private: \_\_\_\_\_

Amount Due: \_\_\_\_\_ Date paid: \_\_\_\_\_ Manager Signature: \_\_\_\_\_