



Private Lesson Request Form

Participant's Name: _____ D.O.B. ____ / ____ / ____ Age: _____

Address: _____

Primary phone number: _____ Alt.: _____

Email: _____

Parent/Guardian: _____

Number of lessons registered: _____ (4 or 8)

Skill level of participant (use skill sheet to determine): _____

Preferred days/times (lessons will primarily be scheduled during open swim or other group lessons; inside or out):

Instructor preference: _____

Special instructions/goals for participant: _____

Please read: A certified instructor will be contacting you to schedule your lessons. If you do not show up for a lesson, it will not be made up. If a situation arises and you cannot make it, please call the location of your lesson and let them know no less than 30 minutes before your lesson begins in order to reschedule your lesson. If the lesson is cancelled due to inclement weather, your lesson will be rescheduled.

*** Private lessons CANNOT be scheduled during Lap Swim or Water Fitness classes, unless given prior approval by Aquatics Supervisor.**

Emporia Recreation Commission: (620) 340-6300

Jones Aquatic Center: (620) 340-6400

Please write these numbers down now.

**Could take up to 3 weeks for first lesson*

(continued on back)

Waiver Statement

The undersigned states that he/she understands that the Emporia Recreation Commission/sponsors are not and shall not be responsible for or liable for any illness or injury to person or damage to property resulting from the programs in which the undersigned is enrolling the above participants in, and the undersigned hereby forever releases and holds harmless the said Emporia Recreation Commission and sponsors from any and all claims or any kind that the enrolled or his/her heirs, executors, administrators or assigns may have or claim to have resulting from his/her participation in said programs. Also, the undersigned waives any and all claims that he/she or his/her heirs, executors, administrators or assigns may have or claim to have resulting from a photograph (Digital, Black/White, Color, and Internet) taken of said person while participating in a program or activity.

Signature: _____

Date: _____

Instructor Use Only:

Date Lesson Given:	Parent's Initials:	Swim Instructor's Time:

This must be turned into Jen at the completion of your lessons.