

Town of Hoosick Community Pool Learn-to-Swim Program 2019 Registration

Participant Information

Participant Name: _____ Birth Date: _____ Sex: _____
 _____ First Last
 Street Address: _____
 City: _____ State: _____ Zip: _____
 Telephone: _____ Mobile: _____
 E-mail Address: _____

Emergency Information

Parent/Guardian Name: _____
 Secondary Emergency Contact: _____
 Telephone: _____ Mobile: _____ Relationship: _____

****Medical Information****

Does the participant have any medical condition the instructor should be aware of? (For example, diabetic or suffers from seizures.) Circle one: Yes No
 If yes, please explain:

Course Information

Course Name	Course Time	Sessions 2 weeks each	
Level 1	10 AM – 10:30 AM	Session 1 – July 8, 2019– July 19, 2019	
	11 AM – 11:30 AM		
	12 PM – 12:30 PM		
Level 2	10:30 AM – 11:00 AM		Session 2 – July 22, 2019 - August 2, 2019
	11:30 AM – 12:00 PM		
	12:30 PM – 1:00 PM		
Level 3	10:00 AM – 10:45 AM	Session 3 – August 5, 2019- August 16, 2019	
	11:30 AM – 12:15 PM		
Level 4	10:45 AM – 11:30 AM		
	12:15 PM – 1:00 PM		
Level 5	11:30 AM – 12:15 PM		
Level 6	12:15 PM – 1:00 PM		

Choice of Level: _____ Time: _____

Fee Information

Fee: \$35.00 for Residents
 \$80.00 for Resident Family of 3 or more
 \$50.00 for all Non-Residents

** The Town of Berlin
 pays the fee for Residents of
 Berlin & Cherry Plain.*

All checks can be made payable to the Town of Hoosick
 *Please note: In accordance with our policy, children under ten years of age should not be left unsupervised. *Parent or Guardian Signature required for all participants under 18 years of age.
 Signature: _____ Date: _____

*Mail to: Annette Bell
 PO Box 191
 Berlin NY 12022*

*_____ driving
 _____ bus*