

**Lockhart I.S.D. Community Education
2018 American Red Cross Learn to Swim Program Registration Form**

Child's Name: _____ Age: _____ DOB: _____

Please put a ✓ in the box for session and class level you wish to enroll.

Session One	Class	Time	Session One Enroll		Session Two	Class	Time	Session Two Enroll
June 11 - 15	P&C (A)	10:30 – 11:00 am			July 9 - 13	P&C (A)	10:30 – 11:00 am	
June 11 - 15	P&C (B)	11:05 – 11:35 am			July 9 - 13	P&C (B)	11:05 – 11:35 am	
June 11 - 15	P&C (A)	7:00 – 7:30 pm			July 9 - 13	P&C (A)	7:00 – 7:30 pm	
June 11 - 15	P&C (B)	7:35 – 8:05 pm			July 9 - 13	P&C (B)	7:35 – 8:05 pm	
June 18 - 29	PS Level 1	8:30 – 9:00 am			July 16 - 27	PS Level 1	8:30 – 9:00 am	
June 18 - 29	PS Level 2	9:05 – 9:35 am			July 16 - 27	PS Level 2	9:05 – 9:35 am	
June 18 - 29	PS Level 1 & 2	7:00 – 7:30 pm			July 16 - 27	PS Level 1 & 2	7:00 – 7:30 pm	
June 18 - 29	Level 1	8:30 – 9:00 am			July 16 - 27	Level 1	8:30 – 9:00 am	
June 18 - 29	Level 1	9:05 – 9:35 am			July 16 - 27	Level 1	9:05 – 9:35 am	
June 18 - 29	Level 1	7:35 – 8:05 pm			July 16 - 27	Level 1	7:35 – 8:05 pm	
June 18 - 29	Level 2	9:40 – 10:25 am			July 16 - 27	Level 2	9:40 – 10:25 am	
June 18 - 29	Level 2	9:40 – 10:25 am			July 16 - 27	Level 2	9:40 – 10:25 am	
June 18 - 29	Level 2	10:30 – 11:15 am			July 16 - 27	Level 2	10:30 – 11:15 am	
June 18 - 29	Level 2	7:00 – 7:45 pm			July 16 - 27	Level 2	7:00 – 7:45 pm	
June 18 - 29	Level 3	10:10 – 10:55 am			July 16 - 27	Level 3	10:10 – 10:55 am	
June 18 - 29	Level 3	10:30 – 11:15 am			July 16 - 27	Level 3	10:30 – 11:15 am	
June 18 - 29	Level 3	7:50 – 8:35 pm			July 16 - 27	Level 3	7:50 – 8:35 pm	
June 18 - 29	Level 4	9:20 – 10:05 am			July 16 - 27	Level 4	9:20 – 10:05 am	
June 18 - 29	Level 4	7:00 – 7:45 pm			July 16 - 27	Level 4	7:00 – 7:45 pm	
June 18 - 29	Level 5/6	8:30 – 9:15 am			July 16 - 27	Level 5/6	8:30 – 9:15 am	
June 18 - 29	Level 5/6	7:50 – 8:35 pm			July 16 - 27	Level 5/6	7:50 – 8:35 pm	

Please see other side for more information →

Child's Name: _____

Parent One Name _____
Mailing Address _____ City/St/Zip _____
Home Phone _____ Work Phone _____ Cell Phone _____

Parent Two Name _____
Mailing Address _____ City/St/Zip _____
Home Phone _____ Work Phone _____ Cell Phone _____

Emergency Contacts and Persons Authorized to Pick Up Your Child (must be at least 18 years of age):

Name _____ Relationship _____
Home Phone _____ Work Phone _____
Cell Phone _____

Name _____ Relationship _____
Home Phone _____ Work Phone _____
Cell Phone _____

List any health restrictions, conditions, or special needs (allergies, vision, hearing, etc.) about child:

CONSENT TO TREAT A MINOR

Family Doctor _____ Telephone _____
Hospital Preference _____ City _____

In case of accident or serious illness, I request a school district employee contact me. If the school district employee is unable to reach me, I hereby authorize school personnel to call EMS to receive emergency treatment deemed necessary. This procedure is to be carried out in any instance of injury or severe illness wherein school authorities feel that my child's condition warrants such action. Further, I agree to assume the cost of such emergency care both to the receiving hospital, attending physician and EMS services.

POLICIES

1. The park and pool entrance fees are waived **only** while your child is attending swim lessons. Participants must stop at the park office each day for admittance.
2. While observing your child's class from inside the pool area, you cannot interact with your child during their lessons (unless enrolled in Parent & Child class). Class observers are not allowed in the pool at any time.
3. Registered participants are allowed in the pool during their class time only. If you leave and return to pick up your child, you understand classes are either 30 or 45 minutes in length and will arrive promptly to ensure child's safety and supervision.
4. If you are not in attendance during your child's swim lesson, you must complete the emergency contact and consent to treat a minor section of registration form.
5. Students will be on time, in swimsuit, with a towel and hair secured away from face.
6. If a class is canceled due to inclement weather, efforts will be made to reschedule the class within the session. However, due to the nature of the facility schedule, all canceled classes may not be rescheduled. There will be no refunds for canceled classes due to inclement weather.
7. REFUND POLICY: 100% if class is canceled due to minimum class enrollment not met. 80% for withdrawal before 3rd class meeting.
8. Lockhart ISD Community Education has my permission to use photographs taken of my child during the swim class program to be used for promotional purposes in the local newspaper and the school district website. Child's name will not be published with the photographs. **Yes** ____ **No** ____

I/We the parents and/or guardians of the above named enrollee, hereby approve this application for enrollment, assuming all risks and hazards incidental to the conduct of such class and hereby release, absolve and hold harmless the organizers, sponsors, supervisors, and instructors of such class of any claim which may arise by reason of injury of said enrollee while participating in such class or while at the pool during the conduct of any said class, or in anyway incidental to such enrollment or participation.

Signature of Parent/Guardian _____ Date _____