



AquaKids®, Inc. Enrollment Form

_____	_____	_____	_____
Last Name	Student Name	DOB	Age
_____	_____	_____	_____
	Student Name	DOB	Age
_____	_____	_____	_____
	Student Name	DOB	Age

Mother's Name _____ Home Phone _____ Cell Phone _____

Father's Name _____ Cell Phone _____

E-mail address _____ Alt. E-mail address _____

Address _____ City _____ Zip _____

Mother's Employer _____ Work Phone _____

Father's Employer _____ Work Phone _____

How did you hear about AquaKids®, Inc.? _____

Does the student have any physical or learning disabilities? _____ No _____ Yes *(If so, please see a manager)*

If so, explain: _____

Emergency Contact (someone other than yourself):

Name: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____

Read and initial the following policies:

- _____ I understand that swim lessons should never replace constant adult supervision.
- _____ I understand that AquaKids®, Inc. reserves the right to reschedule any class with enrollment of 2 or less students.
- _____ I understand that due to operational costs, tuition for swim lessons is **nonrefundable** and credit is given **only** in the event of a medical emergency.
- _____ I understand that make-up lessons are offered as a courtesy to the customers of AquaKids®, Inc. and that there is no guarantee that the make-up times will be convenient with my schedule. Following one free make-up lesson, I agree to pay a \$3.00 make-up fee. This fee is due at the time I schedule my make-up lesson and is nonrefundable, should I cancel the lesson. There is a \$10 reschedule fee for private lessons. The make-up policy does not apply to classes cancelled by AquaKids®, Inc.
- _____ I understand that AquaKids®, Inc. does not offer make-up lessons for swim camps due to the accelerated pace of the session.
- _____ I understand that all make-up lessons must be completed during the session in which the class was missed and cannot be carried over into the next session.
- _____ I understand that all children under the age of 3 or children whom are not potty trained, must wear a cloth, non-disposable swim diaper.
- _____ AquaKids®, Inc. is not responsible for any lost or stolen personal items.
- _____ I will notify AquaKids®, Inc. if my child comes under a physician's care during the course of instruction.
- _____ I give permission for all photos taken by AquaKids®, Inc. to be used in advertising.

I have read and agree with all of the above statements.

Parent/Guardian Signature _____ Date _____