AquaKids® Enrollment Form

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

Mother's Name_____ Phone_____ Text Notification: Yes _____ No _____

Father's Name_____ Phone_____ Text Notification: Yes _____ No _____

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®? _____

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 agree to indemnify and hold harmless AquaKids®, its agents, and employees from and against any claims for damages to persons or property arising out of any use of the facility and its premises by user. AquaKids® is not responsible for any lost or stolen personal items.
- Swim lessons should never replace constant adult supervision.
- AquaKids® reserves the right to reschedule any class with enrollment of 2 or less students.
- Tuition for swim lessons is **nonrefundable** and credit is given **only** in the event of a medical emergency.
- Make-up lessons are offered as a courtesy to customers of AquaKids®. Make-up lessons are scheduled based on availability and spaces may be limited. Following one free make-up lesson, I agree to pay a $5.00 fee. This fee is due at the time I schedule a make-up lesson and is nonrefundable. There is a $10 reschedule fee for private lessons. The make-up policy does not apply to classes cancelled by AquaKids®.
- AquaKids® does not offer make-up lessons for swim camps due to the accelerated pace of the session.
- Make-up lessons must be completed during the session in which the class was missed.
- Children under 3 years old, or children that are not potty trained, must wear a non-disposable swim diaper.
- I agree to notify AquaKids® if my child comes under a physician's care during the course of instruction.

_____ I give permission for all photos taken by AquaKids® to be used in advertising.

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

Parent/Guardian Signature_____ Date_____