



Swim Lesson Registration Form



**American
Red Cross**

Participants Name		Gender	Date of Birth	Grade
		M / F		
Activity Registration Code	Class Time	Class Days		Fee
To help us best plan for the student, please list any information regarding how they learn best. Ensure to include any physical or intellectual disabilities.				

Participants Name		Gender	Date of Birth	Grade
		M / F		
Activity Registration Code	Class Time	Class Days		Fee
To help us best plan for the student, please list any information regarding how they learn best. Ensure to include any physical or intellectual disabilities.				

Parent/Guardian (HH)			FRC Member
			Y / N
Mailing Address Street	City/Town	State	Zip Code
Primary e-mail address: e-mail is our primary source of contact for program reminders & announcements.			
Primary Phone Number			

Assumption of Risk and Release: I understand that there are risks, as well as benefits, associated with participation in the class. I understand that the risks include personal injury, disability and even death. I, on behalf of myself, my child, and those acting on my or my child's behalf, voluntarily assume all risks involved in participating in said activity. Furthermore, in confidence of the benefits, I, on behalf of myself, my child and those acting in my or my child's behalf, irrevocably and unconditionally release and hold harmless The Fitness and Recreation Center and those acting in its behalf from any and all liability, lawsuits, claims, and actions arising from or connected with participation in said activity. I understand that I will be handed an information sheet on the first day of lessons and will abide by the contact on that sheet.

I have read this release and I understand its content.

Signature of Participant or Guardian

Date

For Front Desk Use Only

Step 1: Global Sales/HH look up. (If CHILD is not in RecTrac, add the HH using PARENT as primary), CLICK add new member to add child, SAVE and click ACTIVITY TAB

Step 2: Highlight children and click each activity

Step 3: Add to cart - check boxes to assign correct activity



Amount Paid (100% required to register)	Payment Type	Staff Initials	Today's date