

Registration for Fall Tiger Swim Lesson Program



Please complete all spaces listed below and sign the waiver so we can process your registration more efficiently.

Swimmer Information

Participant's Name: _____ Male or Female
(last) (first)

Date of Birth: ____/____/____ School: _____ Grade Completed: _____

Parent/Guardian Name (if under 18) _____
(last) (first)

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: Mother: _____ Work Phone: Mother: _____
Father: _____ Father: _____

Cell Phone: Mother: _____ Father: _____

Is Participant or Parent/Guardian a University Employee? Yes No

If so, Campus Address: _____

Email Address

If you would like to receive email updates on the Learn to Swim Program, please provide email here:

Emergency Information

Emergency Contact (not a parent): _____ Relationship: _____

Emergency Phone: _____ Does the participant have medical insurance coverage? Y or N

Insurance Company: _____

Please list any illness, medical conditions, allergies, or special medications we need to be aware of:

Program Costs

Mon/Wed or Tues/Thurs lessons cost \$40 per session.

Full payment is due at time of registration. Registration closes at 8pm on the last day of registration per session.

Registration Information

Parents/guardians must be present in the Student Rec Complex for the duration of lessons.

Children are required to be supervised by an adult at all times.

Fill out class information on reverse side based on previous levels passed or by estimating appropriate level. Descriptions of levels may be found in the Rec Services & Facilities Handbook or mizzourec.com. Class levels may be combined or cancelled depending on number of swimmers registered. Swim Lessons sessions meet on Monday-Thursday mornings and evenings, Monday & Wednesday or Tuesday & Thursday evenings, or Saturday mornings depending on the session. Each class will run for 45 minutes, with the exception of Parent Tot, which meets for 30 minutes. If you have specific questions, please contact the Aquatics Coordinator, Carrie Steuber at 884-3795 or via email steubercl@missouri.edu. For further information visit our website at www.mizzourec.com

Class Information

***Spots are available to the first 40 registration forms received for each session time.**

Please circle the correct information.

Class Time and Days:

Session 1: (Aug 30th- Sept 23rd) Registration Deadline is 8/26/10 40 spots per class time
There will be no class on Monday, Sept 6th, make up will take place on Friday, Sept 10th
6:00pm (Pre Pre+ Level 1 2 3 4 5 6 Fitness) Mon/Wed or Tues/Thurs

Session 2: (Sept 27th - Oct 21st) Registration Deadline is 9/23/10 40 spots per class time
6:00pm (Pre Pre+ Level 1 2 3 4 5 6 Fitness) Mon/Wed or Tues/Thurs

Session 3: (Oct 25th - Nov 18th) Registration Deadline is 10/21/10 40 spots per class time
6:00pm (Parent tot Pre Pre+ Level 1 2 3 4 5 6 Fitness) Mon/Wed or Tues/Thurs

Class verification

Session: _____ **Day:** _____ **Time:** _____ **Level:** _____

Informed Consent

I understand that the staff of the Learn to Swim Program reserves the right to terminate any child(ren)'s participation in the program due to behavioral issues. I understand that there is a risk of injury involved any time a child participation in the program due to behavioral issues. I understand that there is a risk of injury involved any time a child participants in sports or recreation activities such as those being conducted in the Learn to Swim Program. With knowledge of such risk and in consideration of my child(ren) being permitted to participate, I agree to assume the risk of such injuries and agree to release the University of Missouri, its employees, and agents from any and all liability for such injuries to my child(ren) resulting from his/her/their participation in the Learn to Swim Program. I also authorize the University of Missouri and its agents to request emergency medical treatment or care as necessary to insure the well-being of my child. Further, I claim that he/she they is/are in good health and are able to participate in all program activities. By signing this document I understand that photographs may be taken of my child(ren) participating in the program activities and agree to allow Rec Services to use these images for promotion of the program, the department, and the University. I understand that I may cancel within 72 hours (3 business days) of registration for any reason, and that after that period, the Rec Services cancellation policy will be in effect.

I understand that the Learn to Swim Program will not offer make-up times for missed lessons.

Parent/Guardian Signature

Date

Office Use Only

Total Sessions: _____ Date: _____
Type of Payment: _____ Method: Cash / Check / MC / VISA / DISC / Stu. Chrg.
Card Number: _____ Exp. _____ Clerk: _____