Last Name:		

Participant:			
lame:		Age:	
ast Level Completed:	Medical Conditions:		
arent/Guardian's Name:		Phone Number:	
esidence (Please Circle): Rimbey / F	Ponoka County / Lacombe Cou	ıntv / Other	
ease be aware that there is <u>no pub</u> e lessons from designated viewing amber that you can be reached at? ternate Phone Number:	areas. If you are not staying at th		
essons Registered (Please	<u>Circie):</u>		
Session 1 - July 5-9, 2021	Session 2 – July 12-16	Session 3 – July 19-23	Session 4 – July 26-30
Sea Otter	Sea Otter	Sea Otter	Sea Otter
Croc/Whale	Sunfish	Croc/Whale	Sunfish
Sunfish	Salamander	Sunfish	Salamander
Salamander	Starfish/Duck	Salamander	Starfish/Duck
SK1	Sea Turtle	SK1	Sea Turtle
SK2	SK 1	SK2	SK 1
SK3	SK 2	SK3	SK 2
SK 4	SK 3	SK 4	SK 3
SK 5/6	SK 4	SK 5/6	SK 4
Private	SK 5/6	Private	SK 5/6
Private	SK 7/8/9/10	Private	SK 7/8/9/10
Private	Private	Private	Private
*****			.:
# of Classes Registered	our child's spot in the cla Level	Cost	Total
	Preschool	\$35.00	1 0 0 0 1
	Levels 1-4	\$45.00	
	Levels 5-10	\$55.00	
	Private – 1 child	\$20.00 /30 mins.	
	Semi-Private 2 children to	\$25.00 /30 mins.	
	maximum of 4 children.	First 2 \$25.00 each	
	additional \$10.00		
	Must be only 1 level lesson	difference between children	
y signing below I acknowledge the splained them to my child.			
gnature:	Dat	e:	
essons may be cancelled a minimum ould prohibit us from having lessons			
or Office Use			
• • •	. . .	-	
leceipt #	Date Entered:	Ir	nitials:

0 Class Canceled (Reason:_