

**Parent/Tot
Adult**

*Dupage Swim Center
April 12 - May 29*

Last Name

Parents Name _____ *Email Address _____

Address _____ City _____ Zip _____

Home Phone _____ Work Phone _____ Cell _____

Best Time to Call _____ *We will call you as soon as we process your registration to confirm color level and times. Therefore it is important to leave a number where you can actually be reached.*

Child's Name _____ DOB _____ Sex _____

1st Choice: Day _____ / _____ Time _____

2nd Choice: Day _____ / _____ Time _____

3rd Choice: Day _____ / _____ Time _____

- Parent/Tot Level 1
- Parent/Tot Level 2
- Parent/Tot Level 3 & 4
- Adult

← Please
Check One

2nd Child's Name _____ DOB _____ Sex _____

1st Choice: Day _____ / _____ Time _____

2nd Choice: Day _____ / _____ Time _____

3rd Choice: Day _____ / _____ Time _____

- Parent/Tot Level 1
- Parent/Tot Level 2
- Parent/Tot Level 3 & 4
- Adult

← Please
Check One

Payment MUST BE INCLUDED AT TIME OF REGISTRATION.

Credit Card # _____ Expiration Date _____

Signature _____ Amount: \$ _____

Dupage Swimming Center P/Tot & Adult Policies

- There are no refunds for missed classes
- There will be no make-up dates for this session
- Please note that instructors may miss class due to illness or other reasons.
- Parents are welcome to view lessons from the lobby or classroom. Parents are asked to leave pool deck once lessons start; children tend to pay better attention when they can focus completely on the class and not on parents or other caregivers. There will be times that the classroom is in use for other activities and not available for lesson viewing. During these times, only the lobby will be available for lesson viewing.
- **Swimmers with hair shoulder length or longer, are required to tie it back or wear a cap.** This helps keep the pool clean and prevents the filters from getting clogged with hair. Hair ties are available at the front desk.
- Children not potty trained are required to wear a swim diaper, rubber pants, and swimsuit in the pool.
- Lockers are available for your convenience. Please bring a lock to secure your possessions, as the DuPage Swimming Center will not be responsible for any lost or stolen property.

I hereby assume full responsibility for and total risk of any injury, loss or damage (including injury to person or loss of property) sustained in, on, or about the premises of the DuPage Swimming Center, Inc. I hereby consent and agree that the DuPage Swimming Center, Inc. and its affiliates, and their directors, officers, employees, agents, independent contractors and representatives shall not be liable for any such injury, loss or damage, and for myself and my family members, and on behalf of myself and my family members and their personal representatives, assigns, successors, executors, administrators, heirs and next-of-kin, I hereby full and forever release and discharge the DuPage Swimming Center, Inc. and its affiliates, and their representatives from all liabilities, claims, demands, rights of action or causes of action resulting from acts or omissions of active or passive negligence on the part of the DuPage Swimming Center, Inc. and its affiliates, and their representatives, arising from injury, loss or damage sustained by me and members of my family in, on, or about the premises of the DuPage Swimming Center, Inc

I acknowledge that I have **read** the DuPage Swimming Center Policies **and understand them.**

Parent/Caregiver Signature

Date

Student Name(s)