

2021 Private Swimming Lesson Registration Form

Name of Child: _____

Age: _____ Male Female

Last Grade completed in school: _____

Parents: _____

Address: _____

Phone #: _____

Emergency Contact: _____

Phone #: _____

Time and Days: _____

Preferred Lifeguard: _____

Parents signature _____

Guard signature _____

Email completed form to oberlinpool@oberlinkansas.gov