



FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# YMCA OF GEORGIA'S PIEDMONT BRAD AKINS BRANCH GROUP SWIM LESSONS

NAME

ADDRESS

CITY  ZIP

PHONE  ALT. PHONE

BIRTHDAY

EMAIL ADDRESS

### ADDITIONAL SWIMMER INFORMATION

ANY PHYSICAL/MEDICAL PROBLEM WE SHOULD KNOW ABOUT?		
EMERGENCY CONTACT	WORK/CELL PHONE #	HOME PHONE #
1.		
2.		

### PARENT – GUARDIAN INFORMATION

FATHER'S NAME	BUS. PHONE	CELL PHONE
MOTHER'S NAME	BUS. PHONE	CELL PHONE

**Check out Swim Team Prep for  
more advanced options!**

- Swim lessons cannot be moved to a different class once the session has started.
- Make up lessons/refunds will not be given if participants do not attend their assigned lesson.
- If there is only one participant in a class then that person will be asked to combine classes or will do 30 min lessons.

OFFICE USE ONLY	
CHECK #	_____
CASH	_____
CREDIT CARD	_____
DATE RECEIVED	_____
STAFF INITIAL	_____