

Playday.....Playday.....Playday

Swim Lesson Registration

(Student Name) First Name: _____ Last Name: _____

(Parent/Guardian) First Name: _____ Last Name: _____

Phone number: (H): _____ (Cell): _____

Grade level completed: _____ Age: _____

My child will be taking Level 1 2 3 4 5 swim lessons.

* If you are unsure of the level of swimming lessons to sign your child up for please answer the following questions:

1. Will your child put their face in the water? _____

2. Will your child submerge their entire head underwater? _____

Comfortably & repeatedly or only if asked? _____

3. Does your child float on their front? _____ and back? _____

4. Does your child swim a few arm strokes independently? _____ doggy paddle? _____
front crawl/freestyle? _____ underwater swimming? _____

5. Is your child comfortable swimming 15 feet frontcrawl/freestyle? _____
backstroke? _____ elementary backstroke? _____

6. Is your child comfortable swimming in water over their head independently?

7. Is your child able to swim 25 yards in the competition pool? _____ doggy paddle?
_____ frontcrawl? _____ backstroke? _____ elementary backstroke? _____

8. Is your child able to swim 15 yards of Breaststroke? _____ sidestroke? _____
backstroke? _____ butterfly? _____