

CITY OF PORT WASHINGTON | PARKS & RECREATION DEPARTMENT

Private Swim Lesson Request Form

CONTACT INFORMATION:			
Participant's Name:	Age:	Sex:	MI
Parent/Guardian Name:	Phone:		
Email:			
PARTICIPANT INFORMATION:			
Please list and disability or accommodations reques	t:		
		YES	l NO
Previous swim lessons or experience?		1 - 0	
Please describe if yes:			
Comfortable in the water?			
Feels comfortable putting head underwater			
Can swim independently without floatation?			
Can swim length of pool (25 yards) without aid?			
LESSON AVAILABILITY: Please note that private lessons are NOT available during 12-6pm or Mon., Wed., & Thurs. 6:30-8:30pm.) The broad match it to an instructor's schedule. Lessons are schedule. Days: Requested Time (Range) Monday:	der your requested time range, the g	reater the ab	
Tuesday:			
Wednesday:			
Thursday:			
Friday:			
Saturday:			

Sunday:_____

Information Regarding Private Swim Lessons

- Private Lessons are offered at Pirates' Hollow Community Waterpark- 201 N Webster Street, Port Washington, WI 53074
- Private Lessons will not be scheduled during public open swim hours.
- Classes are on a first come first serve basis and scheduled according to pool space and instructor availability.

Private Swim Lesson Polices & Agreement:

Signature:

- 1. I understand that submission of this form requesting private lessons does not guarantee the lessons. I understand that lessons are available based on instructor's availability at the times I have requested.
- 2. All private lessons will e scheduled between the instructor and the participant. Instructors will contact participants when they have an opening for private lessons.
- 3. To cancel a lesson, a 24 hour notice to the instructor must be given. If notice is not given, the lesson missed will count as one of your scheduled lessons.
- 4. Full payment for lessons is required BEFORE the first lesson. A receipt must be given to the instructor on the first day of lessons so that he or she can record the transaction in his/her records.
- 5. The instructor will notify the participant (or parent) 24 hours in advance if he/she finds the need to cancel the scheduled lesson.
- 6. Participants arriving late will not have make-up time. If a participant is 10 minutes late or more, that lesson can be cancelled and will not be made up.

Date:

For Staff use Only:

LESSON FEES:		To oldin doo ony.				
		Lesson #	Date:	Time Scheduled	Initial When	
Private Swim Lesse (1 swimmer)	,				Completed:	
1 lesson package 3 lesson package 6 lesson package						
Semi-Private Swim (2 swimmers with sir abilities)						
1 lesson package 3 lesson package 6 lesson package	\$25-R/ \$30-NR \$72-R/ \$87-NR \$138-R/ \$168-NR					
		OFFICE USE	ONLY:			
Date Submitted:_						
No. of Lessons So	heduled:					
Total Fee:	Date Paid:	Pa	yment ID: _			
Instructor Assigne	d:					