Randolph Community Swimming Lesson Registration Form								
Little Fish (Ages 18mo-3YRS)- \$40 Big Fish (Ages 3-5YRS)- \$40								
Dolphin Tails (Ages 4-6YRS)- \$50 Learn to Swim 1-6 (must be 5 and able to touch the bottom of the pool)- \$60								
Registrant First, La	st Name:				Age:	DOB:	_/_	/
Last Class Passed:	Class Desired:					2024-25 School Grade:		
Mailing Address:				City, State, Zip:				
Do we have your p	ermission t	o take ph	otos and video	s of your child du	ring lesso	ons?	Υ	N
Do we have your permission to post photos and videos to our facebook page?							Υ	N
Can we share your	child's pho	to with th	ne local newspa	per?			Υ	N
Registrant First, La	st Name:				Age:	DOB:	_/_	/
Last Class Passed:			Class Desired:		2024-2	5 School Gr	ade:	
Mailing Address:				City, State, Zip:				
Do we have your permission to take photos and videos of your child during lessons?							Υ	N
Do we have your permission to post photos and videos to our facebook page?							Υ	N
Can we share your	child's pho	to with th	ne local newspa	per?			Υ	N
Registrant First, La	st Name:				Age:	DOB:	_/_	/
Last Class Passed:	Class Desired: 20					2024-25 School Grade:		
Mailing Address: City, State, Zip:								
Do we have your permission to take photos and videos of your child during lessons?							Υ	N
Do we have your permission to post photos and videos to our facebook page?						Υ	N	
Can we share your child's photo with the local newspaper?						Υ	N	
Registrant First, La	st Name:				Age:	DOB:	_/_	/
Last Class Passed:		Class Desired: 2024-25 School Gr					ade:	
Mailing Address:	Nailing Address: City, State, Zip:							
Do we have your permission to take photos and videos of your child during lessons?							Υ	N
Do we have your permission to post photos and videos to our facebook page?							Υ	N
Can we share your child's photo with the local newspaper?							Υ	N
Primary Contact Name/Number:								
Emergency Contact Name/Number:								
Parent/Primary Print: Date:								
Parent/Primary Signature:								
Parent/Primary Contact Email:								
OFFICE USE ONLY Amount Due \$ Amount Paid \$ Cash Check #								

LIABILITY STATEMENT: By signing this form, I agree that Instructors, lifeguards, and all City Employees shall not be liable for the injury or death of any participants or applicant in the Randolph Community Swimming Lessons, or in any program description accompanying this application.