

# THE VERMILION COMMUNITY POOL

4846 PINEVIEW DR. VERMILION, OH 44089 440) 9671- 9071



## 2023 Swimming Lesson Registration Form

Registrations and payments (of check or cash) will be accepted at the Vermilion Community Pool.



Swimming Lessons are 45 Minutes in Length Held Monday Through Friday for Two Weeks.  
Cost: \$15.00 per child (per session) who is a Resident of Vermilion or a Vermilion Community Pool Member.

Session I	June 12 <sup>th</sup> – June 23 <sup>rd</sup>	10:00 AM, 11:00 AM	or	6:00 PM
Session II	July 10 <sup>th</sup> – July 21 <sup>st</sup>	10:00 AM, 11:00 AM	or	6:00 PM
Session III	July 31 <sup>st</sup> – August 11 <sup>th</sup>	10:00 AM, 11:00 AM	or	6:00 PM

Cost for Nonresident swimming lessons is \$50.00 per student (per session)

### NAMES OF CHILDREN ENROLLING IN LESSONS

1. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Age: \_\_\_\_ Session (please circle): I II III Time: \_\_\_\_\_
2. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Age: \_\_\_\_ Session (please circle): I II III Time: \_\_\_\_\_
3. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Age: \_\_\_\_ Session (please circle): I II III Time: \_\_\_\_\_
4. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Age: \_\_\_\_ Session (please circle): I II III Time: \_\_\_\_\_
5. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Age: \_\_\_\_ Session (please circle): I II III Time: \_\_\_\_\_
6. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Age: \_\_\_\_ Session (please circle): I II III Time: \_\_\_\_\_

### PARENT/GUARDIAN CONTACT INFORMATION

NAME: \_\_\_\_\_ CELL #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**Waiver:** I understand that participation in activities or programs is completely voluntary, and that the activity or program being offered is for the benefit of the participant. The City of Vermilion shall not be liable for any claims, injuries, or damages of whatever nature, incurred by the participants who are directly or indirectly attributable to the negligence, whether passive or active, of the City of Vermilion, their agents or employees, arising out of, or in connection with the activity or programs. On behalf of the participant and myself, I expressly release and discharge the City of Vermilion, their agents or employees from any such claims, injuries or damages. I also understand this waiver includes any injuries that may result from the condition of the facility used in the activity or program.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Weather:** In the event of Inclement Weather, every attempt will be made to reschedule cancelled class/classes. There are no make-up for missed classes on the participant's part.

**Thank You to the Vermilion Rotary Club and NOPEC for Their Generous Donations Making This Year's Swimming Lessons Affordable to ALL Vermilion Youth.**