

CEDARBURG COMMUNITY POOL
Private Swim Lesson Request

Date: _____

OFFICE USE ONLY
Request # _____
(order in which request was received)
Initials: _____

Participants Name: _____ Age: _____

Parent (Contact Name): _____

Address: _____

City: _____ Zip Code: _____

(Check One) City Resident Town Resident Non-resident

Contact Telephone Number: _____

Swimming Level: _____

(If unsure, leave blank until a Manager or Instructor contacts you)

Week Requested:	June 15	Time Ranges Requested:	<u>Morning Times</u>
	June 22		8:30 – 9:00
	June 29		9:00 – 9:30
	July 6		10:00 – 10:30
	July 13		10:30 – 11:00
	July 20		11:00 – 11:30
	July 27		<u>Evening Times</u>
	August 3		4:45 – 5:15
	August 10		5:15 – 5:45
	August 17		5:45 – 6:15

Sessions: Three (3), one half hour classes

Session Fees: Resident = \$55.00

 Non-resident = \$110.00

***FEES ARE TO BE PAID AFTER SCHEDULING ARRANGEMENTS ARE MADE WITH A MANAGER. YOU WILL BE CONTACTED BY A MANAGER IF YOUR REQUEST CAN BE ACCOMMODATED.**

NOTE: Staff tries to fill one request for every participant before scheduling a second session of private lesson.

Comments: _____
