



Learn to Swim Activity Registration



Guardian Last Name		Guardian First Name	
Address () ()		City ()	Zip ()
Home Phone	Cell Phone	Work Phone	Emergency Phone
<input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Cash <input type="checkbox"/> Check	Email: Check # :		Received by:

Participant Information

Participant First Name	Participant Last Name	DOB	Gender	Activity #	FEE
		/ /	M / F		
		/ /	M / F		
		/ /	M / F		
		/ /	M / F		

Participant Release Total Fees: _____

I, the below signed as adult (or the parent), do hereby release the City of Delta, its agents or employees, from liability for injuries or damages which may result to myself (my child) as a result of the participation of myself (my child) in the City of Delta Recreation Program. Further, the applicant agrees to save and hold harmless the City of Delta, its officers, agents, or employees, for any damages or personal injury which may result from these activities.

Signature Date

Registration Dates: **MW & T/TH: March 1-April 6** **Sat: March 1-April 13**

✓	Description	Dates	Times	Days	Activity #	FEE
	Parent Tot	April 11-April 28	6:00-6:30pm	MW	99-A1	\$30.00
	Level 1	April 11-April 28	6:00-6:30pm	MW	99-A2	\$30.00
	Level 2	April 11-April 28	6:40-7:10pm	MW	99-A3	\$30.00
	Level 3	April 11-April 28	6:40-7:10pm	MW	99-A4	\$30.00

✓	Description	Dates	Times	Days	Activity #	FEE
	Level 1	April 12-April 28	4:00-4:30pm	T/Th	98-AA	\$30.00
	Level 3	April 12-April 28	4:00-4:30pm	T/Th	98-AB	\$30.00
	Level 1	April 12-April 28	4:40-5:10pm	T/Th	98-AC	\$30.00
	Level 2	April 12-April 28	4:40-5:10pm	T/Th	98-AD	\$30.00
	Level 3	April 12-April 28	5:20-5:50pm	T/Th	98-AE	\$30.00
	Level 4	April 12-April 28	5:20-5:50pm	T/Th	98-AF	\$30.00

✓	Description	Dates	Times	Days	Activity #	FEE
	Parent Tot	April 16-April 30	9:00-9:40am	Sat	20-A2	\$21.00
	Level 2	April 16-April 30	9:00-9:40am	Sat	20-A3	\$21.00
	Level 1	April 16-April 30	9:50-10:30am	Sat	20-A1	\$21.00
	Level 3	April 16-April 31	9:50-10:30am	Sat	20-A4	\$21.00