

MONTROSE COMMUNITY POOL SWIMMING LESSONS

Parent/Guardian _____ Phone:_____

Address _____ City_____ State _____

Today's Date _____

Emergency Contact If Needed: (Name and Phone Number) _____

_____

- **RED CROSS SWIMMING LESSON LEVELS**

2027 **SESSION 1 Dates: JUNE 14th – JUNE 17th / JUNE 21st – JUNE 24TH**

2027 **SESSION 2 Dates: JULY 12TH – JULY 15TH / JULY 19th – JULY 22nd**

- Level 5 – 8:30 – 9:00
- Level 4 - 9:15 – 9:45
- Level 3 - 10:00 – 10:30

Level 2 – 10:45 – 11:15
Level 1 – 11:30 – 12:00

- **SESSION SIGN- UP - PLEASE PRINT**

SWIMMER'S NAME	LEVEL	SESSION	Special Comments
	1 2 3 4 5	1 or 2	
	1 2 3 4 5	1 or 2	
	1 2 3 4 5	1 or 2	
	1 2 3 4 5	1 or 2	
	1 2 3 4 5	1 or 2	

WAIVER: I do hereby release the City of Montrose and the lifeguards for any responsibilities in case of an emergency/accident during swimming lesson hours. In addition, I realize that **all fees must be PAID IN FULL before admission into swimming lessons.**

Parent/Guardian Signature: _____

Notifications about lesson/pool/weather cancellations will be posted on the city's Facebook page.

Total Amount Due $ _____ **Date Paid** _____/_____/_____