

Private Swim Lesson Request Form



PARTICIPANT NAME _____ BIRTHDATE _____ AGE _____

PHONE _____ ALT PHONE _____

EMAIL _____

INSTRUCTOR PREFERENCE: MALE FEMALE NO PREFERENCE _____ REQUESTED INSTRUCTOR _____

Additional participants (if any):

NAME _____ BIRTHDATE _____ AGE _____

NAME _____ BIRTHDATE _____ AGE _____

NAME _____ BIRTHDATE _____ AGE _____

What is the highest level of swim lessons you have completed? None Level 1 Level 2 Level 3 Level 4 Level 5 Level 6 Don't Know

Do you have any health issues we should be aware of?

What is your goal for these lessons?

Do you have any special needs or instructions?

Scheduling

(NOTE: Listing more than one day and time will make it easier to schedule your lessons.)

DESIRED START DATE: _____

PREFERRED LESSON DAY / TIME: Sun Mon Tue Wed Thu Fri Sat _____ TIME: _____

SECOND CHOICE DAY / TIME: Sun Mon Tue Wed Thu Fri Sat _____ TIME: _____

THIRD CHOICE DAY / TIME: Sun Mon Tue Wed Thu Fri Sat _____ TIME: _____

Pricing (per person)

Packages are sold in multiples of three or six lessons; once the first full package is purchased and used, you may buy additional single lessons or another package. All participants in a semi-private lesson must be members to receive the member price. **All lessons are 30-minutes.**

Lesson Type (all lessons are 30-minutes)	Member Price			Non-member Price		
Private Lessons (one person)	1 lesson: \$22	3 lessons: \$63	6 lessons: \$120	1 lesson: \$27	3 lessons: \$78	6 lessons: \$150
Semi-Private (up to four people)	1 lesson: \$14	3 lessons: \$39	6 lessons: \$72	1 lesson: \$19	3 lessons: \$54	6 lessons: \$102

NOTE: Private and semi-private lessons are subject to an 24-hour cancellation policy. A participant failing to cancel at least 24 hours prior to a lesson will forfeit that lesson. Lessons cancelled by the Kroc Center will be made up at another time. Payments for lessons are not refundable or transferable after the first lesson.

DATE RECEIVED: _____ RECEIVED BY: _____ SCHEDULED BY: _____ **KROC KREW USE ONLY**

SCHEDULED START DATE: _____ SCHEDULED DAY AND TIME: _____

NUMBER OF LESSONS: _____ PAYMENT AMOUNT: _____ PAYMENT PROCESSED: _____

INSTRUCTOR ASSIGNED: _____