

Registration Form for the Harrisville Swim Lessons – 2014

Forms may be mailed to: Elaine Belawske P.O. Box 356, Spofford, NH 03462 or bring to the first lesson.

* Note: Please fill out one form per swimmer.

Name: _____ D.O.B. _____

Address: _____

Phone Number(s): _____

Email: _____

(used often – for important information like cancellations due to weather)

Please check the swim time that you plan to attend during the summer session. Refer to the level requirements.

_____ 9:00 am – 9:30 am – Teen and Adult Swim Tips

_____ 9:30 am – 10:00 am – Level One/Pre-Level One (parents come in with their children)

_____ 11:00 am – 11:30 am - Level One

_____ 11:30 am – 12:00 pm – Level Two

_____ 12:00 pm – 12:30 pm – Level Three

_____ 12:30 pm – 1:00 pm – Level Four, Five, and Six

Information that you feel will be helpful and important for the instructor to know about your child while they are taking swimming lessons. Any medical needs, special services need, etc. please contact the instructor prior to lessons.
