

Private Swim Lesson Information Sheet

If you are interested in taking Private Swim Lessons with one of our Certified Swim Instructors, please follow the directions below:

- Please complete the attached Private Swim Lesson Registration Form.
- Bring the form to the Aquatics office or give it the form to the Front desk.
- Please allow **2-7 days** for us to process your form.
- Based on your availability and swim level/ability we will provide the Swim Instructor.
- Upon finding Swim Instructor who fits your needs- You can/will make the payment for your Swim Lessons package and schedule the first class.

<u>Note</u>:

*If purchasing a Private Lesson for one (1) — two (2) participants, please ensure that they face similar swimming abilities in order to maximize learning.

Lessons are thirty minutes

Lessons are sold according to the packages and pricing below:

Private Lesions (1-2 participants) °				
Number of Lessons	Full Member Rate	Program Member Rate		
1	\$48	\$65		
6	\$240	\$324		

Semi-private (3-4 participants) *			
Number of Lessons	Full Member Rate	Program Member Rate	
N/A	N/A	N/A	

Revised: 1/23/2024



Private Lesson Registration Form

Participant/Parent Info

Name		
Primary Phone:	Secondary Phone:	
Email Address:		
Please choose one of the following option		
O 1 Lesson O 6 Less	sons O If Special is of	fered (number of lessons purchased)
Student Information:		O Same as above
Name:	Age (if o	child):
	C (,
Primary Phone:	Secondary Phone	o:
Swimming Ability: O Beginner	O intermediate O Advance	ed
Additional Information		
·		
Availability:	Instructor Request:	
Days:	·	Instructor:
•	O I need an instructor	ilistructor.
Times:	O I have Instructor	Instructor:
	O I nave instructor	
Survey: How did you hear about Private Les	sons at the YMCA?	
		
By registering fo	r Private Lessons you are also accepting the	e policies detailed below.
NOTE: Any scheduled session canceled less than 24 ho	urs in advance will be charged against your pa	ckage. All Private Lessons Packages expire within 8 months. Failure
to utilize purchased sessions will result in package expirate become medically unable to participate proof via medical		ion date. Sessions may be placed in temporary suspension should you e.
Waiver: Waiver applies to all lessons completed, for the re	,	
WAIVER: I understand that the YMCA of Metropolitan Washington	assumes no responsibility for injuries or illnesses wh	nich I may sustain as a result of my physical condition or resulting
from my participation in any equipment, exercise, or other activities which may result from participation in these activities. I hereby release	s. I expressly acknowledge on behalf of myself and	my hei rs' that I assume the risk for any and all injuries and illnesses its agents, servants, and employees from any and all claims of injury,
uliness death loss or damage which I may suffer as a result of my part	and discharge the Two/t of well opolitan washington,	
or stolen while members or program participants are using YMCA facil	icipation in these activities. I understand that the YMC/ ities on YMCA premises. I give my permission to the YI lude my image or voice for numose of promotion or inte	A of Metropolitan Washington is not responsible for personal property lost MCA of Metropolitan Washington to use indefinitely, without obligation or empreting YMCA programs. Lacknowledge the waiver and cancellation
or stolen while members or program participants are using YMCA facil limitation photographs, film, footage, or tape recordings which may inc policy set forth above.	icipation in these activities. I understand that the YMC/ ities on YMCA premises. I give my permission to the Y ude my image or voice for purpose of promotion or inte	nich I may sustain as a result of my physical condition or resulting my heirs that I assume the risk for any and all injuries and illnesses its agents, servants, and employees from any and all claims of injury, A of Metropolitan Washington is not responsible for personal property lost MCA of Metropolitan Washington to use indefinitely, without obligation or prepeting YMCA programs. I acknowledge the waiver and cancellation

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