

SWIMMING LESSONS

Summer 2018



General Information

Person Responsible: _____

Address: _____

Contact Number: _____

Email: _____

Swimming Lessons:

Please checkmark the Activity you would like below
Four lessons per session.

Activity	Date	Time	Cost
	Session 1: June 18 – June 29	7:30pm–8:30pm Tues. & Thurs. (or) Mon. & Wednesday	\$40.00
	Session 2: July 9 - July 20	7:30pm-8:30pm Tues. & Thurs. (or) Mon. & Wednesday	\$40.00
	Session 3: June 16 - July 7	8:15am-9:15am Saturday Mornings	\$40.00

1.) Swimmer: _____ Age: _____ Level: _____

2.) Name of Swimmer: _____ Age: _____ Level: _____

3.) Name of Swimmer: _____ Age: _____ Level: _____

4.) Name of Swimmer: _____ Age: _____ Level: _____

Payments Type

Cash: _____ Check: _____ Check Number: _____

Confirmation preference: Phone: _____ Email: _____

Forms may be dropped off at South County Realty (next to Casey's),
or mail to: Ashland Optimists PO Box 201 Ashland, MO 65010
or email to pool.soboco@gmail.com

