

SWIMMING LESSONS

Summer 2017



General Information

Person Responsible: _____

Address: _____

Contact Number: _____

Email: _____

Swimming Lessons:

Please mark the session you would like below

Four lessons per session.

Activity	Date	Time	Cost
	Session 1: June 19 – June 30	7:30pm–8:30pm Tues. & Thurs. (or) Mon. & Wednesday	\$40.00
	Session 2: July 10 - July 20	7:30pm-8:30pm Tues. & Thurs. (or) Mon. & Wednesday	\$40.00
	Session 3: June 17 - July 8	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 City Hall or South County Realty (next to Casey's), or mailed to: Ashland Optimists PO Box 201 Ashland, MO 65010

