

East End Pool
463 Schiller Avenue
Elmhurst, IL 60126
630-993-8986



Normal P. Smalley Pool
665 South York Street
Elmhurst, IL 60126
630-993-8985

PRIVATE SWIM LESSON APPLICATION

Today's Date: _____ Preferred Pool (check one): _____ East End _____ Norman P. Smalley

SWIMMER INFORMATION

Swimmer's Name: _____ Age: _____ Circle one: M / F

Skill Level (Please check one): _____ Beginner _____ Intermediate _____ Advanced

What are your goals for the swimmer?

Please list additional information or special accommodations needed:

PARENT INFORMATION

Parent's Name: _____ E-mail: _____

Home Phone: _____ Cell Phone: _____

Address: _____ City: _____ State: _____

Emergency Contact Name: _____ Relationship: _____ Phone: _____

AVAILABILITY

List all times swimmer is available for lessons:

Please note: Private Swim Lessons are available from 12-5pm and 7-8pm at East End Pool, and from 12-7pm at Norman P. Smalley Pool.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Times Available							

Please check one: _____ Male Instructor _____ Female Instructor _____ No Preference

Desired Instructor (if any): _____

Number of private lessons I would like to have: _____

PRIVATE LESSON FEES - ALL FEES REFLECT A 30 MINUTE LESSON FOR ONE SWIMMER

Please check your choice of lesson options:

Resident: _____ 1 Lesson for \$32

Non-Resident: _____ 1 Lesson for \$40

PRIVATE LESSON CANCELLATION POLICY

Private swim lessons may not be cancelled or refunded. Private swim lessons may be rescheduled if we receive a verbal or written notice more than 24 hours before the start time of the lesson. Rescheduling is based on instructor availability.

PRIVATE LESSON RESERVATION INFORMATION

You are not guaranteed a private swim lesson until you receive a confirmation email from the program manager or swim lesson coordinator. Elmhurst Park District Registration Staff will contact you for payment once your private lesson(s) has been scheduled.

Completed applications must be returned to either pool or the following location:

Wagner Community Center

615 N. West Avenue

Elmhurst, IL 60126

Phone: (630) 993-8900

Registration / Brochure Waiver & Release**IMPORTANT INFORMATION**

The Elmhurst Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Elmhurst Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program must recognize that there is an inherent risk of injury when choosing to participate in recreational activities.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or adequately skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING

Swimming and other aquatics activities are intended to challenge and engage the physical, mental and emotional resources of each participant. However, despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury, including but not limited to drowning, head/brain injury, and cervical spine injury. Understandably, not all hazards and dangers can be foreseen. The very nature of swimming and aquatic activities are hazardous and risky, including but not limited to fatigue and overexertion, poor swimming skills, failing to avoid dangerous areas, failure of lifeguards to locate victims and/or delay in emergency response time, horseplay, diving or cannon-balling into shallow water and striking the bottom or side of the pool or waterslide, poor supervision or instruction, lack of conditioning, becoming disoriented, striking other swimmers, defective or inadequate equipment, striking one's head on the bottom when using a diving block, slipping or falling on the deck or within the locker facility, chemical exposure and all other circumstances inherent to aquatic activities and aquatic facilities. In this regard, it must be recognized that it is impossible for the Elmhurst Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Elmhurst Park District, including its officials, agents, volunteers and employees.

PHOTOGRAPHY

Photos and videos are periodically taken of people participating in Park District programs and activities. All persons registering for Park District programs/activities, or using Park District property thereby agree that any photograph or videotape taken by the Park District may be used by the Park District for promotional purposes including its promotional videotapes, brochures, flyers, and other publications without additional, prior notice or permission and without compensation to the participant.

Please Print Participant's Name

Participant's Signature

Date

(18 years or older or Parent / Guardian)

Participation will be denied if signature of adult participation or parent/guardian and date are not on this waiver

OFFICE USE ONLY

Date/Time received: _____

Instructor Assigned: _____

Lesson Date(s): _____

Lesson Time: _____

Payment Type: Cash / Check Number: _____ / Credit Card

Amount Paid: \$ _____