



Hammerhead Swim Club
PO Box 541
Fredonia, New York 1406
www.hammerheadswimclub.org

HHSC Learn To Swim Registration Form

Please Print

Last Name _____ First _____ MI _____

Age _____ Date of Birth _____ Sex: M or F

Address: Street _____
 City: _____ State _____ Zip: _____

Father's Name _____ Address _____
 (Please Print) (If different)

Mother's Name _____ Address _____
 (Please Print) (If different)

Home # _____ Mom's Cell _____ Dad's Cell _____

*Email(s) _____

Emergency contact _____ Phone# _____

I will not hold the HHSC or SUNY Fredonia legally or financially responsible for the emergency care and/or transportation of my child. In the event an emergency arises, and a parent is unexpectedly not present, every effort will be made to contact parents or guardians as soon as possible.
 A parent/guardian is to be present at each lesson.
 I agree to inform the instructor of any change in my child's medical or physical condition which develops or is discovered at any time after the date this document is signed.

Medical concerns/ conditions that your child is currently being treated for: _____

Please circle the days you prefer:

Beginner Lessons: 6:15 to 6:55pm Cost: \$75.00 (2 days a week for four weeks)
 Monday/Wednesday or Tuesday/Thursday

Intermediate Lessons: 7:00 to 7:40pm Cost: \$75.00 (2 days a week for four weeks)
 Monday/Wednesday or Tuesday/Thursday

2018-2019 Dates: Session 1: 09/24-10/18 Session 2: 10/22-11/15 Session 3: 01/07-01/31

Please note: Every effort will be made to fit you in as requested. Time slots are granted on a "first come first serve" basis. Class size will be limited to 5-7 students per session. Only students are allowed on deck, parent viewing is from the balcony seating area.

Parent/Guardian Printed Name _____ Signature _____ Date _____

PLEASE MAKE CHECKS PAYABLE TO: HHSC

PO Box 541
Fredonia, NY 14063