



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

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Upcoming Dates:

January 10

February 14

March 13

April 10

May 8

Program Fee:

XXXXFX



Registration Information

Parent(s) First Name*

Parent(s) Last Name*

Middle Initial*

Home Phone*

Cell Phone*

Work Phone*

Family Email*

Mailing Address*

City*

State*

Zip*

Emergency Contact Name*

Emergency Contact Number*

Please Select a Session:

January 10 February 10 March 13 April 10 May 8

Participant Name*

Date of Birth*

Grade*

School Attends*

_____ I have attached a check for the registration

_____ I have attached cash for the registration

_____ I would like the registration fee auto-debited from my YMCA membership account.

_____ I agree to follow the YMCA rules on proper swim attire stated on the YMCA website

_____ Yes, I give the YMCA permission to take pictures of me participating in this program.

_____ No, please do not take any pictures of me

Signature _____ Date _____ Staff Initials _____

By signing, I authorize the YMCA to use pictures of my Child for Promotional Purposes.

*Required to Register

Cancellation Policy

We understand that everyone has busy lives, therefore we will be more than willing to make refunds. Please remember these guidelines when making changes. Cancellations made 7 days prior to the start date of the lesson will receive the registration fee minus a \$5 processing fee. If cancellations are made **less than 7 days prior** to the scheduled start date No refunds will be given. If the program is cancelled due to low enrollment the full registration fee will be refunded.