

Bonner Springs Aquatic Park Private Swim Lessons Form

Season 2020

Participants Name:			Date of Birth:		
Address:					
City:		State: Zip:			
School Child Attends: _		Age:	Grade:	Gender:	
Parent / Guardian Nam	ne:				
Phone Number:		Email:			
Day	Time		What skills woul	d you like to work on?	
Sunday*	10:00 AM – 10	- 10:30 AM			
Monday	10:30 AM – 11:00 AM				
Tuesday	11:00 AM – 11:30 AM 11:30 AM – 12:00 PM				
Wednesday			Instructor request:		
No evening times on Sundays	7:00 PM – 7:30) PM			
	7:30 PM – 8:00) PM	How many losses	ns? 1 2 3 4	
	8:00 PM – 8:30) PM	How many lessons? 1 2 3		
Commission from any and all liability indemnify and hold harmless the City all claims resulting from injuries, dan the event of emergency, I authorize (necessary for me (and/or my child's) Recreation Commission facilities, equ responsible for payment of any repaidiscretion photograph(s) (black/whit electronic means. Registration is not	WAIVER AND wild's) participation in this activity, I hereby releast arising from accident, injury and illness that I (or of Bonner Springs, Kansas and the Bonner Springs, Kansas and the Bonner Springs, Kansas and the Bonner Springs, and losses sustained by me (and/or my chicity or Recreation Commission officials to secure immediate care and agree that I will be responsipment or materials occurs as a result of misusers and/or replacement needed. Also, the under e or color) taken of participants while participatic valid without signature. By signing, participant	se and discharge the r my child/children) ngs Recreation Comn ild/children) arising if from any licensed hible for payment of a by me (and/or my c signed and/or the pang in City or Recreat has read all facility ru	may suffer as a result of partici nission and the officials, agents out of, connected with, or in ar ospital, physician or medical pe iny and all medical services ren hild) during use in activity enro irticipant(s) authorize the City of ion Commission programs and ales, waiver and release for all p	pation in such activity. I further agree to s, and employees of each from any and ny way associated with the activity. In ersonnel any treatment deemed dered. If any damage to City or olled or participating in, I will be or Recreation Commission to use at its activities for marketing in print or by	
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