

MADAWASKA VALLEY SWIM PROGRAM - 2019

Child's Name:	Age:
Last Swimming Level Completed:	
Home Phone:	Work/Cell Phone:
Home Address:	
	Work/Cell Phone:
	provide any additional information that you deem important (i.e. scheduling
concerns/requests, allergies, special needs, etc.)	
(Please note: the above information is simply to help in the dev	velopment of the schedule and is not a guarantee that your request will be fulfilled.)
Program Registration Fees	
Note: Program registration and paymer	nt will <u>only</u> be accepted at the municipal office
Check One:	Check One:
Session 1 July 2-July 19	Combermere (Mayflower Beach)
Session 2 July 22-August 9	Barry's Bay (Lakeshore Park)
Both Sessions July 2-August 9	
Lesson Times:	
	nmodate participants later in the day if there is an interest.
·	e. Sessions will start at 10am and end at 6pm.
C Lessons Before 2pm	·
Clessons After 2pm	
Rates before June 24, 2019 (Regi	stration/Payment received before):
One Session:	Two Sessions:
\$70.00 Resident Child)\$130.00 Resident Child
\$85.00 Non-Resident Child	
	\$190.00 Private Lesson (Resident)*
\$120.00 Private Lesson (Non-Residen	t)* \$230.00 Private Lesson (Non-Resident)*
BRONZE CROSS/MEDALLION: Cost based	on interest. Contact: Jasmine Scott – 613-334-9636 or <u>jasminescott.swim@gmail.com</u>
Rates after June 24, 2019(Registi	ration/Payment received after):
One Session:	Two Sessions:
()\$100.00 Resident Child)\$190.00 Resident Child
\$115.00 Non-Resident Child	\$220.00 Non-Resident Child
O 1	\$250.00 Private Lesson (Resident)*
	t)* \$290.00 Private Lesson (Non-Resident)*
Total:	
	ons are based on availability
RESIDENT CHILD MUST BE A RESIDENT	OR CHILD OF A RATEPAYER OF THE TOWNSHIP OF MADAWASKA VALLEY
I/we understand the inherent risk of injury involve	d in participation in this swimming program and verify that I will not hold the
Township of Madawaska Valley responsible for any	

*Please note: Payment <u>MUST</u> be received in full by first day of lessons. Program participation will not be allowed until appropriate

forms and payment have been received by the municipal office. **No refunds will be given following the 2nd of each session.**

Signature______Date_____