

PRIVATE LESSON PACKAGES

1:1 Student – Teacher Ratio (4 lessons, 30-minutes)

Member \$130 Non-Member \$170

SEMI- PRIVATE LESSON PACKAGES

2:1 or 3:1 Student – Teacher Ratio (4 lessons, 30 minutes)

Member \$90 Non-Member \$120

Swim Lesson Payment Information

_____ Account Charge, # _____

_____ Credit Card (Amex, Visa, Discover, MC)

Card Number

Exp: _____ CVV: _____

_____ Cash: \$ _____

_____ Check # _____

SWIMMER INFORMATION

Parent Name: _____

Phone Number: _____ Email: _____

Swimmer Name: _____ Age: _____

Level

- Beginner
- Intermediate
- Advanced

Preferred Instructor: _____

Preferred Day: _____ Preferred Time: _____

Franco's Athletic Club, being a private club, is only to be used by members and their guests. If I am not a member, I understand that I only have access to the pool area, locker rooms and Grill area for my child immediately prior to, during, or after the swim lesson and that I, or my child, cannot use any other part of the club unless it is being used for this program. The undersigned desires to voluntarily utilize the services and, if applicable, facilities and equipment provided by Franco's Athletic Club. As a consideration for the right and privilege of being permitted access to Franco's Athletic Club, and if applicable, facilities and equipment, the undersigned does hereby release Franco's Athletic Club, its owners, agents, and employees from any and all liabilities of any kind whatsoever arising out of any physical or mental injury or damage incurred or sustained by the undersigned, minor child of the undersigned, or the undersigned's property, while voluntarily preparing to use, using or cleaning up after using, any of the services and applicable facilities and equipment provided by Franco's Athletic Club; and furthermore, agrees to save and hold harmless Franco's Athletic Club, its owners, agents, and employees, for any damages or injuries arising out of the undersigned's, or the undersigned's minor child, use of the facilities, equipment and/or services. The undersigned also acknowledges that photos may be taken for publicity/marketing purposes and gives his/her authorization for any photos of his/herself, or of their minor child, to be used in this fashion.

Furthermore, the undersigned acknowledges that he or she has obtained independent medical approval to use the services, facilities and equipment provided by Franco's Athletic Club for themselves, or for their minor child, and that he or she has made Franco's Athletic Club aware of any limitations suggested by his/her physicians.

The undersigned acknowledges and affirms the he or she has carefully read this release and has asked and obtained a satisfactory explanation of any part that he or she does not understand.

Signature of Parent _____ Date _____