



# PLEASANTON TEXAS

"BIRTHPLACE OF THE COWBOY"



## SWIMMING LESSON REGISTRATION/ PERMISSION FORM

Name of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St.: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone #:( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Work Phone#:( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Student Name: \_\_\_\_\_ M/F: \_\_\_\_\_ DOB \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

*Sessions are Tuesday- Friday; \$50 per two-week session; payable at the Pleasanton Civic Center*

\_\_\_\_\_ Class I: 10:00am-10:30am Dates: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_ Class II: 10:30am-11:00am Dates: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Pool Location:** 1414 Downey Dr. , Pleasanton, TX 78064

**Pool Phone:** (830) 569-3996

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**ACKNOWLEDGEMENT**

I, \_\_\_\_\_ parent/ guardian, hereby give permission for my child, \_\_\_\_\_, to participate in the City of Pleasanton swim lesson summer program.

I acknowledge the fact that he/she is physically able to participate in all swim activities. The undersigned here by releases the City of Pleasanton, along with its employees, from any claims, demands, or cause of action, whatsoever in any way, resulting from the participation in the swimming program. I acknowledge that I am responsible for any medical costs that might be incurred.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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**FOR OFFICE USE ONLY**

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Amount Received \$ \_\_\_\_\_ Receipt #: \_\_\_\_\_

Check #: \_\_\_\_\_ Received by: \_\_\_\_\_