



*DOMINION COUNTRY CLUB*

*PRIVATE SWIMMING LESSON FORM*

Parent First & Last \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Children's Name(s):

_____	Age _____
_____	Age _____
_____	Age _____
_____	Age _____
_____	Age _____

**Lessons**

**MEMBER - \$30.00**

**NON – MEMBER/GUEST - \$40.00**

**Payment Type:** Member # \_\_\_\_\_ CC# \_\_\_\_\_ Ex \_\_\_\_\_ CVC \_\_\_\_\_

Please contact Head Swim Coach at [dominionswimteam@gmail.com](mailto:dominionswimteam@gmail.com) to set up.

Lessons are 30 minutes long and held by appointment. **Cancellations need to be at least 24-hour advance notice.**

Please note any further information you feel necessary about your swim student

\_\_\_\_\_  
**Parent Authorization:** The Dominion cannot be held responsible for an illness or injury or accident occurring either at or away from the Dominion. If an accident or illness should occur during the swimming lesson, the Dominion has your permission to obtain emergency medical care by qualified medical personnel for your child.

Parent Signature: \_\_\_\_\_