PRIVATE & SEMI-PRIVATE SWIM LESSONS

Pricing and Registration Form
YMCA OF SPRINGFIELD

### PRIVATE SWIM LESSON PACKAGES

<table>
<thead>
<tr>
<th>Time</th>
<th>Lessons</th>
<th>Member</th>
<th>Public</th>
</tr>
</thead>
<tbody>
<tr>
<td>30 Min</td>
<td>Single</td>
<td>$30</td>
<td>$50</td>
</tr>
<tr>
<td>30 Min</td>
<td>5– Pack</td>
<td>$125</td>
<td>$200</td>
</tr>
<tr>
<td>45 Min</td>
<td>Single</td>
<td>$45</td>
<td>$75</td>
</tr>
<tr>
<td>45 Min</td>
<td>5 – Pack</td>
<td>$200</td>
<td>$320</td>
</tr>
</tbody>
</table>

### SEMI-PRIVATE SWIM LESSON PACKAGES

<table>
<thead>
<tr>
<th>Time</th>
<th>Lessons</th>
<th>Member</th>
<th>Public</th>
</tr>
</thead>
<tbody>
<tr>
<td>30 Min</td>
<td>Single</td>
<td>$50</td>
<td>$80</td>
</tr>
<tr>
<td>30 Min</td>
<td>5– Pack</td>
<td>$200</td>
<td>$320</td>
</tr>
<tr>
<td>45 Min</td>
<td>Single</td>
<td>$75</td>
<td>$120</td>
</tr>
<tr>
<td>45 Min</td>
<td>5 – Pack</td>
<td>$300</td>
<td>$480</td>
</tr>
</tbody>
</table>

LESSON TRACKER—INSTRUCTOR USE ONLY

Lesson 1 ____________________________________________
Lesson 2 ____________________________________________
Lesson 3 ____________________________________________
Lesson 4 ____________________________________________
Lesson 5 ____________________________________________
PRIVATE SWIM LESSONS

SWIMMER INFORMATION

NAME ____________________________________________

DOB: __/__/____ Skill Level: __________________________

Parent/Guardian __________________________________

Email: __________________________________________

Telephone Number: ________________________________

NAME ____________________________________________

DOB: __/__/____ Skill Level: __________________________

Parent/Guardian __________________________________

Email: __________________________________________

Telephone Number: ________________________________

NAME ____________________________________________

DOB: __/__/____ Skill Level: __________________________

Parent/Guardian __________________________________

Email: __________________________________________

Telephone Number: ________________________________

LESSON REGISTRATION INFORMATION

Would you prefer a specific instructor?

____________________________________________________

(Leave blank for no preference)

Would you prefer a male or female instructor?

□ Male  □ Female  □ No Preference

Branch Preference*

□ Downtown  □ Kerasotes  □ Flexible

*Please note: while we will make every effort to accommodate your branch preference there will be circumstances in which the opposite branch will be more conducive to the participants lesson. Branch flexibility will allow for a wider range of instructors and pool availability.

Which days are you available? (Check all that apply)

□ Mon  □ Tue  □ Wed  □ Thu  □ Fri  □ Sat  □ Sun

Which hours are you available? (Check all that apply)

□ Before 8a  □ 8a-12p  □ 12-4p  □ After 4p

GOALS

WHAT ARE THE GOALS OF THE PRIVATE LESSON?

___________________________________________________________

___________________________________________________________

• Payment must be made in full before scheduling lessons
• Turn form and payment in at front desk at either facility
• Lesson instructors will contact you to schedule lessons
• 24-hour notice required to cancel lessons

Please read the policy below, then print and sign your name. By signing this, you are agreeing to the terms and conditions of the Cancellation & Refund Policy.

I, _________________ (Client) agree to notify the instructor or the front desk at the YMCA 24 hours prior to a scheduled lesson, if I need to cancel. I understand that if I fail to cancel, I will still be charged for the lesson. I also understand that no refunds will be given for private lessons, with the exceptions of a medical health emergency with a signed note from my primary physician and that arriving late will result in minutes lost from the lesson.

I, _________________ (Instructor) agree to notify the client 24 hours prior to a scheduled training session if I need to cancel. I understand that if I fail to cancel or reschedule the training session, I will provide the client with one free session.

Client Signature_____________________________________________ Date_________________________

(Print Name) __________________________________________________________________________

Instructor Signature_____________________________________________ Date_________________________

(Print Name) __________________________________________________________________________

All No Call/No Show will result in an automatic charge to the training package.

OFFICE USE ONLY

Transaction code: 1241

DATE: __/__/____ AMOUNT: $______ STAFF: ________ CASH: ________ CHECK: #______________ CHARGE: 

30  45  60 SINGLE 5-PACK

Payment Processed at (circle one) Branch 1 Branch 2