

FRANKLIN KNOLLS SWIMMING LESSON PROGRAM
REGISTRATION FORM

Child's Name _____ Date of Birth _____

Child's Name _____ Date of Birth _____

Child's Name _____ Date of Birth _____

Child's Name _____ Date of Birth _____

Telephone - Home _____ Cell _____

Pool Membership Number _____

Parent/Guardian Name _____

Session you are Registering For: **(Please Circle)** (You must complete a separate form for each session.)

Session One Morning
June 19-29, 2017

Session One Night
June 19-29, 2017

Session Two
July 5-14, 2017

Session Three
July 17-27, 2017

FEES: \$50 for Pool Members and \$65 for Non-Members

Payment must accompany this form and should be in the form of check or money order made payable to: Franklin Knolls Swimming Pool.

Please leave registration forms at the pool office or mail to:

Patty Quinn
9433 Curran Road
Silver Spring, MD 20901

Deadlines: Session One - Wednesday, June 14, 2017; Session Two - Wednesday, June 28, 2017;
Session Three - Wednesday, July 12, 2017. All forms must be received by 7:00pm on the deadline.
(Allow time for mailing process.)

By signing below, I affirm that I have read the Swimming Lessons Program Information Letter with more details about dates for each session, days classes are held, and make-up policies.

Parent Signature

Date