



Spruce Lodge Pool **Swimming Lesson Registration Form**

643 West Gore Street,
Stratford, ON
N5A 1L4

Phone: 519-271-2773
Fax: 519-271-5862
E-mail: pool@sprucelodge.on.ca
Website: www.sprucelodge.on.ca

PLEASE SUPPLY AN EMAIL ADDRESS. Your receipt/confirmation WILL BE EMAILED.

If payment is not received with this form, the registration form will not be processed. MAKE CHEQUE PAYABLE TO SPRUCE LODGE POOL

Last Name (Parent/Guardian/Adult)	Parent/Guardian First Name	Postal Code
Family Address	City/Town	Email address (please print legibly)
Main Contact Number where a message can be left:	2nd Contact #/or Home Phone Number	

Family Medical History : Is there any medical information or specials needs that you would like to have us know? Please also indicate whether or not the condition is life-threatening.:

Participant's Last Name	First Name	Birthdate MM/DD/YY	Age	Level: Cost:
1st Choice (Day/Time)				
2nd Choice (Day/Time)				
3rd Choice (Day/Time)				

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2nd Choice (Day/Time)				
3rd Choice (Day/Time)				

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2nd Choice (Day/Time)				
3rd Choice (Day/Time)				

<p>Payment – Please note that post-dated cheques will not be accepted.</p> <p>Cash \$ _____ Cheque \$ _____ Rain Cheque \$ _____</p> <p>**ALL NSF CHEQUES ARE SUBJECT TO A \$20.00 FEE**</p> <hr/> <p>OFFICE USE ONLY</p> <p>Cash/Cheque _____ Process Date _____</p> <p>Raincheque _____ PRC: N H NW Initials _____</p>	<p>Submission of this form does not guarantee placement in a program. Confirmation EMAILS will be made just prior to the start of the program. Conduct that can be deemed harmful to either the patron, or others either in the pool or on the deck, can result in the removal of the person from the program or class. In signing below, you are acknowledging that you will accept the risks involved in the swimming/exercise program you have signed up for, and will not hold Spruce Lodge responsible.</p> <p>Signature _____ Date _____</p> <p>Please note that occasionally there are photos being taken.</p>
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