

Are you enrolled in the current session III-2010? yes / no

# Penguin Enrollment Session IV-2010

*Parent / Child 3 – 6 years old*

**June 29<sup>th</sup> – August 20<sup>th</sup>, 2010 (8 weeks)**

<i>For Staff only</i>
Day _____
Time _____
Rec.# _____
Computer _____
E- mail _____
Called _____

Use the spaces available to mark your class choices with a 1 and 2 in order of preference.  
Please return the form with payment attached to:

**The Janet Pomeroy Center, Attn: Herbst Pool, 207 Skyline Blvd., SF, CA 94132**

Make checks out to: **Janet Pomeroy Center**

If you have any questions please call (415) 665-4241

**Tuesday (June 29<sup>th</sup> – August 17<sup>th</sup>)**      3:00 - 3:45 pm      \_\_\_\_\_      45 Minute Class Fee: **\$ 100**

**Friday (July 2<sup>nd</sup> – August 20<sup>th</sup>)**      3:45 - 4:30 pm      \_\_\_\_\_      45 Minute Class Fee: **\$ 100**

Child's Name (first & last): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (cell) \_\_\_\_\_ (e-mail) \_\_\_\_\_

Any Special Student Requests: \_\_\_\_\_

***Emergency Contact Information:***

Name (of person *not* attending lesson with child): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

***Please read and sign the following waiver.***

**(Pool Rules available online @ [www.janetpomeroy.org](http://www.janetpomeroy.org) and at the pool.)**

**Release and Waiver of Liability and Indemnity Agreement**

The undersigned hereby acknowledges to have read and understands and agrees to abide by The Janet Pomeroy Center facility rules and regulations. The undersigned further agrees to assume full responsibility, risk of bodily injury, death or property damage and to indemnify, save and hold harmless The Janet Pomeroy Center, its directors, officers, employees, and agents from all liability and claim, cause of action obligation and/or damages arising out of accident, injury or death suffered while using any facility or equipment in, upon, or about the premises of The Janet Pomeroy Center. The undersigned further states that the information provided on this application is complete and updated to the best of his/her knowledge.

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