

Are you enrolled in the current session, II-2024? □Yes □No



Recreational Swim Enrollment

Session III – 2024: April 15th – June 1st, 2024 (7 weeks) a Children 6 months to 12 years with an adult *Swim Diapers covered by a swimsuit [as needed] are mandatory in our pool*

Use the spaces available to mark your class choices with a 1, 2, 3 and so forth in order of preference. **Please return the form to:** <u>SwimEnrollment@prrcsf.org</u>.

Visa/MasterCard, checks payable to PRRC, and cash in exact change accepted

If you have any questions, please call 415.665.4241 or email: <u>Aquatics@prrcsf.org</u>

Monday 6 weeks (pool c	Apr 15th–May 20th closed 5/27)	3:00 - 4:00PM <u>FULL</u>	2 people 3 people	\$96 \$144
Thursday 7 weeks	Apr 18th–May 30th	2:00 - 3:00PM	2 people 3 people	(\$48 for each additional person) \$112 \$168
Friday 7 weeks	Apr 19th–May 31st	2:00 - 3:00PM <u>FULL</u>	2 people 3 people	(\$56 for each additional person) \$112 \$168
Saturday 7 weeks	Apr 20th–June 1st	12:00 – 1:00PM <u>FULL</u>	2 people 3 people	(\$56 for each additional person) \$112 \$168 (\$56 for each additional person)

Total # of swimmers:(including adults)	
First Child's Name (first & last):	
Second Child's Name (first & last):	
Third Child's Name (first & last):	
Parent/Guardian's Name:	
Address	
City	
Phone: (primary/cell)	cell phone provider for txt msg alerts
Phone: (secondary/home)	(e-mail)
Emergency Contact Information: Name (of person not attending lesson with child)	Phone

Please read and sign the following waiver. (Pool Rules available online @ www.prrcsf.org and at the pool.)

Release and Waiver of Liability and Indemnity Agreement

The undersigned hereby acknowledges they have read and understood, and agreed to abide by, Pomeroy Recreation & Rehabilitation Center [PRRC] 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 PRRC, its directors, officers, employees, and agents from all liabilities and claims, 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 PRRC. 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 _____

FOR STAFF ONLY Day _____ Time _____ Rec.# _____ Scan _____ Called _____

*A parent/adult caregiver MUST accompany children into the water!