

CALGARY P-TOO LEARN TO SWIM ASSOCIATION REGISTRATION FORM

FALL / WINTER 2010

CALGARY JEWISH CENTRE

Surname: _____ Mother: _____ Father: _____

Address: _____ Postal Code: _____

Home Phone# : _____ Cell Phone# : _____

Email Address: _____ **(Please print carefully)**

First Name	Date of Birth DD/MM/YY	Alberat Health Care #	Fall	Winter

CLASS SCHEDULE

(Please circle)

All Levels Tues/Thurs 4:30-5:15pm
 Tues/Thurs 5:15-6:00pm

FEE SCHEDULE

(Please circle)

Fall Session: Sept. 20 - Jan 20
Winter Session: Jan 25 - May 26
\$230.00 per session, or
\$400.00 for both sessions

Please Post-Date cheque for Sept. 20th, 2010 and make cheques payable to: Calgary P-Too Learn to Swim Association

Please note the P-Too Casino Fundraiser will be held sometime between August and November, our date has not yet been determined. This fundraiser is held once every 18 months and all P-Too Families are required to work a shift. You will be given a \$100.00 credit for working the casino.
Signature of Acceptance: _____

The Calgary P-Too Association on Occasion will post the children's name and photos on the Glenmore Pool Bulletin board with their swim times.

Do you give The Club permission to use your child(ren)'s name and post pictures?

Yes: _____ No: _____ Signature: _____

Please note any pertinent medical information/concerns: _____

Office use only

Cheque# _____ Amount _____ Date of Deposit: _____

Cheque# _____ Amount _____ Date of Deposit: _____