Poseidon Pools, Ltd

Swim Lesson Registration Form

Subdivision / Pool Name: _____

Participant's Name _____ Birthday: _____/_____/_____ Age: _____

Parent/Guardian Name: _____

Address: _____ City: _____ Zip code: _____

Phone: _____ Email: _____

Session	Class/Level	Fee
_____	_____	_____
_____	_____	_____

Method of Payment: ☐ Cash ☐ Check # _____ ☐ Money Order # _____

Registration Policy: Registration forms and payment must be received by the Friday before classes begin. Registration forms received after this day will include a $10.00 late fee. Payments may be made via mail with a personal check or money order. Payments in cash must be made in person at our main office.

Refund Policy: A full refund will be given for any class that is cancelled by Poseidon Pools, Ltd. A full refund will be given for cancellations up to 1 week prior to the start of class. A 20% administrative fee will be charged for cancellations after that time. NO REFUND will be given for cancellations after the class has started.

Inclement Weather Policy: If a class has to be cancelled for inclement weather you will be contacted by your instructor. At your next class session your instructor will give you the makeup date and time. NO REFUNDS WILL BE GIVEN FOR INCLEMENT WEATHER.

Statement of Understanding: I verify that the above information is correct. I have read and fully understand all course requirements including prerequisites and the refund policy as described above. I understand that class sizes are limited and will be filled on a first PAY basis. By signing this form I waive any claims against Poseidon Pools, Ltd. and above named locations and associations for any and all injuries sustained by participants or Parent/Guardians participating or viewing. I also understand that if less than 3 participants are enrolled in the session there will only be six days of classes (semi-private, 2 participants). If there is only one participant enrolled there will only be four days of classes (private lesson, 1 participant).

_____ _____

Signature of Parent or Guardian Date

Please send registration form and payment to:

Poseidon Pools, Ltd. Phone: 281-338-7665

Aquatics Department Fax: 281-316-0561

100 E. Nasa Parkway #303

Webster, Tx, 77598