



Adult Private Lesson Form

90 Swanson Road, Boxborough, MA 01719 – Phone: 978-635-0500/Fax: 978-635-9510

Name: _____ Home Phone: _____

Spouse: _____

Address: _____ Town: _____ Zip: _____

Cell/Work Phone: _____ Member: Y/N

E-mail: _____

Lesson Type: Private (\$45.00 (50.00 with Meg) for 30 minutes) _____ Instructor: _____
(Pre-payment required)

Semi-Private (\$35.00 for 30 minutes) _____ 2nd Adult _____
(Pre-payment required)

Swim Level: _____

Day/Time: _____ Number of Lessons Reserved _____

Cancellation policy: We require a 24-hour cancellation notice for all private and semi-private lessons. Without 24-hour notice, your account will be charged accordingly.

Waiver: By signing below, I recognize the inherent risks of swimming. These include, but are not limited to slipping on wet surfaces, cuts, scratches, broken bones and the potential for more serious injury up to drowning. I understand that physical activity creates a potential risk to the bones, joints, ligaments and muscles as well as the cardiovascular system. By signing below, I release Swymfit, the Harvard Ridge Fitness Center, Inc, its employees, agents and entities thereof from any direct or consequential injuries that may result from participating in the swimming program or being present on the premises. Pool safety rules are posted in the pool area and are additionally available on request. **We do not have a lifeguard on duty.**

By signing below, I confirm that I have read and understood both the the cancellation policy and waiver.

Signature: _____ Date: _____

Payment Method: _____ Check Number: _____

Date of Payment: _____

Amount Paid: _____