2025 VALLEY FALLS	SWIMMING	LESS	ON REGISTRATION
Complete a form for <u>each</u> person enrolling in a swimming class. Drop off or mail completed forms to City Hall, 417 Broadway, Valley Falls, KS 66088 <u>Please include payment when enrolling. Make checks payable to the City of Valley Falls.</u>			
Select a Session: June 16th - June 26th Mornings 8 c Public Session 1 (Levels 1-5) \$40; Le Time: (circle preferred time frame)	evel 1 is for ages 4 a	and above.	ay; Friday if needing to reschedule a class.))-11:40
July 7th - July 11th Evenings 5 - 45 Public Session 2 (Levels 1-5) \$35; Le		-	
Private Lessons \$70 - (5 - ½ hour cla **Limited availability depending on th are no guarantees.	, ,		nes including morning/evening. I do our best to fill all requests, but there
Preschool Class - Introduction to Swir June 23rd - June 27th @ 6:3 July 21st - July 25th @ 6:30p	30pm - 7pm (limit 10	participants	
Name of Participant:			Age:
Last Red Cross Swim Level Class and year Did Participant Pass this level? Yes or No	r, (if known)		Date of Birth:
Parent/Guardian Contact Information:			
Name:	. E	Email:	
Address:	_ F	Phone #:	
Emergency Contact Information:	-		
Name: Relati	ionship:		#:
Contact Info for class cancellations (if differen	it than Parent/Guard	lian):	
Name:	#:		
****May we send a text to the contact/paren	t/guardian for clas	s cancellati	ons or class information? YES NO
Please circle if we can include your child in pic Point. Yes or No			
Office Use Only: Swimming Level: 1 2 3 4 5			
Date Paid	Method: Check	Cash C	ard