# *NOB HILL SWIM CLUB*
## 2009 Swimming Lesson Registration Form
**Rolling Acres Improvement Association – P.O. Box 422**
**Ellicott City, MD  21041 - 410-461-9120**
**www.nobhillswimclub.com**

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Please print clearly.  Additional application and lesson forms are available on the website.

Last name: _____     First name: _____

Address: _____     Email address: _____

_____     Home phone: _____


Teaching young people about safety in and around water is paramount.  Nob Hill Swim Club can partner with you and assist you in giving your children the skills they need.  Nob Hill Swim Club offers a robust swim lesson program that meets the needs of beginners through advanced swimmers and the group lesson program allows for both group and individual instruction.

Please consider registering your child for swim lessons this summer.  Please refer to 2009 Swim Lesson schedule (available on the website) to complete the lesson form accurately.


Child: _____ 1st choice     Session: _____     Class: _____     Time: _____

_____ 2nd choice     Session: _____     Class: _____     Time: _____

Child: _____ 1st choice     Session: _____     Class: _____     Time: _____

_____ 2nd choice     Session: _____     Class: _____     Time: _____

Child: _____ 1st choice     Session: _____     Class: _____     Time: _____

_____ 2nd choice     Session: _____     Class: _____     Time: _____

Child: _____ 1st choice     Session: _____     Class: _____     Time: _____

_____ 2nd choice     Session: _____     Class: _____     Time: _____

**Private Lessons**: On a limited basis, private one-to-one swim lessons are available; please discuss pricing and availability with the Pool Manager after the pool opens for the season.

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Complete the Swim Lesson Summary section on the next page to calculate your registration total

# Swim Lesson Summary

**Total Number of Sessions (member rate):** _____ $50.00 ea   $ _____

**Total Number of Sessions (non-member rate):** _____ $70.00 ea   $ _____

**Total** $ _____

My signature below acknowledges that I have read and understand the Nob Hill Swim Club rules, and agree by the submission of my membership/lesson fees to abide by them (rules available on the website).

On occasion Nob Hill Swim Club (RAIA) takes photographs and/or video of the pool and surrounding property while members are present.  These photos and video segments are used strictly for promotional purposes in print and on the web.  By signing the application form you authorize Nob Hill Swim Club (RAIA) to use photos/video of you and your family members for this purpose.  If you have questions or concerns about this policy please contact the RAIA Board of Directors in writing at info@nobhillswimclub.com.

_____        _____

**Signature**                                                                **Date**

Please make **ALL** checks payable to **Rolling Acres Improvement Association.**  Your canceled check is your receipt. There is a returned check fee of $35.00 for all returned checks.

**For office use only: Check received: _____, 2009   Check No.: _____   Amount: $_____**