

# P.Q.A.C Registration

## Private/Semi-Private Lessons

### Personal Info

Swimmer Name: \_\_\_\_\_ D.O.B.: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

Swimmer Name: \_\_\_\_\_ D.O.B.: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

Father's and Mother's Names: \_\_\_\_\_

Phone # (H): \_\_\_\_\_ (c): \_\_\_\_\_ E-Mail: \_\_\_\_\_

Emergency Contact and Phone #: \_\_\_\_\_

Medical Condition(s) PQAC should be aware of: \_\_\_\_\_

### Requested Instructor (Please circle 1st, 2nd, 3rd choice):

Coach Moe      Coach Sarah      Coach Peter      Coach Okie      Coach Ashley

### When Are you Available for Your Lesson?

Monday: \_\_\_\_\_

Tuesday: \_\_\_\_\_

Wednesday: \_\_\_\_\_

Thursday: \_\_\_\_\_

Friday: \_\_\_\_\_

Saturday: \_\_\_\_\_

Sunday: \_\_\_\_\_

### For PQAC Staff Only:

#### Confirmed Lessons:

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Instructor: \_\_\_\_\_

Program check # \_\_\_\_\_ Amount: \_\_\_\_\_ USS fee check #: \_\_\_\_\_