

# 2009 Summer Swimming Classes

Holiday Lake 4-H Educational Center  
1267 4-H Camp Road  
Appomattox, VA 24522



## Registration Form

Name: (Parents) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Phone Numbers:

Home: \_\_\_\_\_

Cell: \_\_\_\_\_

What is the best way to contact you in the event a class must be canceled?  
(This is often due to weather conditions) \_\_\_\_\_

# of Children attending at \$30/student: \_\_\_\_\_

Total Amount Enclosed \$ \_\_\_\_\_

Names of students to attend:

1) \_\_\_\_\_ Age: \_\_\_\_\_

2) \_\_\_\_\_ Age: \_\_\_\_\_

3) \_\_\_\_\_ Age: \_\_\_\_\_

4) \_\_\_\_\_ Age: \_\_\_\_\_

**Week** and **time** you would like to attend classes:

1<sup>st</sup> Choice

\_\_\_\_\_

*if that week is not available*

2<sup>nd</sup> Choice

\_\_\_\_\_

