

Cedarland Aquatic Center Registration Form

Please complete the registration form and return with full payment to:

Cedardale, Inc, c/o Kelly Simard, 931 Boston Rd., Haverhill, MA 01835

Make all checks payable to Cedardale, Inc.

Keep in mind that to receive the Member Fee the individual registering for the class/swim club must be a current Cedarland Aquatic Center Member or a FULL Member of Cedardale Health & Fitness. You will be notified if we are unable to register your child for the desired classes. For more information or questions please contact (978)373-1596 prior to Oct. 1st or (978)521-7700 after oct 1st.

Parent's Name: _____ Member No. _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____ Email: _____

| Lesson Participant's Name | Class Name | Day | Time | Session | Age | DOB | Fee |
|---------------------------|------------|-----|------|---------|-----|-----|-----|
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |
| 4. | | | | | | | |

Lesson/Membership Packages:

Guppie (1 child for sessions 1 & 2 of lessons, family 3 month membership Oct 1 – Dec 31) \$375

| Lesson Participant's Name | Class Name | Day | Time | Session | Family Members on Membership: | | |
|---------------------------|------------|-----|------|---------|-------------------------------|-----|-----|
| | | | | | Name | Age | DOB |
| 1. | | | | | 1. | | |
| 2. | | | | | 2. | | |
| 3. | | | | | 3. | | |
| 4. | | | | | 4. | | |

Dolphin (2 children for sessions 1 & 2 of lessons, family 3 month membership Oct 1 – Dec 31) \$500

| Lesson Participant's Name | Class Name | Day | Time | Session | Family Members on Membership: | | |
|---------------------------|------------|-----|------|---------|-------------------------------|-----|-----|
| | | | | | Name | Age | DOB |
| 1. | | | | | 1. | | |
| 2. | | | | | 2. | | |
| 3. | | | | | 3. | | |
| 4. | | | | | 4. | | |

- I acknowledge that:
1. There are no make-ups for missed classes
 2. There will be a \$15 surcharge for any cancelled lessons or transfers in time/day or session.
 3. I allow Cedarland the use of all photos taken of my child during lessons to be used for advertising and promotional materials.

Parent's Signature _____