

Mesabi Family YMCA
Private Swim Lesson Request

Student Name : _____ Age : _____

Parent / Guardian : _____

Home # _____ Cell # _____ Work # _____

E-Mail Address : _____

Swimming ability. (ie. Non swimmer, previous lessons, level achieved, scared of water, etc.)

Private Swim Lessons are sessions of 6 classes – 45 minutes each.

Days preferred in the week :

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Times preferred for lessons : _____

How many days a week are desired : _____

What is your goal for with the lessons? (ie. Learn to swim, specific skill training, endurance, getting comfortable in the water, etc.)

Other Comments, Requests or Information :
