

City of Iqaluit
Swimming Lesson Registration Form

Childs Name: _____

Date Of Birth: _____ **Age:** _____

Parents Name: _____ **Phone # (H)** _____ **(W)** _____

****Emergency Contact (if different from above)** **Name:** _____

(H) _____ **(w)** _____

Circle the level your child is to attend:

Parents and Tots:

1	2	3
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 (parent or guardian, must get in the water with child)

Aquaquest:

1	2	3	4	5	6
7	8	9	10	11	12

Swim Patrol

Rookie	Ranger	Star
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(should be entering AquaQuest levels 8-10)

Special Needs or Relevant Information?

