

TOWN OF NEVERSINK PARKS & RECREATION
SUMMER SWIM PROGRAM REGISTRATION

NAME: _____ MALE _____ FEMALE _____

DATE OF BIRTH: _____ AGE: _____ GRADE COMPLETED THIS YEAR: _____

ADDRESS: _____ HOME PHONE: _____

_____ WORK PHONE: _____

EMAIL: _____ PARENT/GUARDIAN CELL #S: _____

PARENT (S) / GUARDIAN (S): _____

EMERGENCY CONTACT: _____ PHONE NUMBER: _____

OTHER INFORMATION: (CAR POOS, SCHEDULES, OTHER CONTACTS, ETC.): _____

PROGRAMS

PLEASE CHECK THE PROGRAMS BELOW THAT YOUR CHILD EXPECTS TO PARTICIPATE IN THIS SUMMER:
PARENT/CHILD AQUATICS:

INFANT/TODDLER (6-18 MO.) LEVEL 1 _____ (18-36 MO.) LEVEL 2 _____

PRESCHOOL (3 YRS W/PARENT) LEVEL 3 _____ (3 YRS W/O PARENT) LEVEL 3 _____

(4 YRS W/O PARENT) LEVEL 4 _____ (5 YRS W/O PARENT) LEVEL 5 _____

LEARN TO SWIM:

LEVEL 1 _____ LEVEL 2 _____ LEVEL 3 _____

LEVEL 4 _____ LEVEL 5 _____ LEVEL 6 _____

CERTIFICATION CLASSES:

WSIA (LEVEL 5-6) _____ GUARD START (11-13 YRS) _____

JR. LIFEGUARD (13-14 YRS) _____ LIFEGUARDING (15 YRS) _____

CPR/AED FPR _____ CPR/AED FPR REVIEW _____

LIFEGUARDING REVIEW _____ STANDARD FIRST AID _____

WATER SAFETY INSTRUCTOR (16 YRS) _____ WSI REVIEW _____

OVER



