



Private Swim Lesson Request Form

Today's Date: _____

THIS IS A REQUEST FORM: After it is filled out, it will be forwarded to the Aquatics Department to schedule your first appointment. You can take care of payment at the Member Services Desk after your first appointment is made. **Payment is due before your first lesson.**

GENERAL INFORMATION: Private swim lessons are available for those seeking more specific swim instruction. Private lessons are offered for those ages 6 years & up. Participants work on swimming skills appropriate for their ability and in accordance with their individual goals. YMCA members can purchase 1 private lesson for \$25 or 4 for \$100. Nonmembers can purchase 1 private lesson for \$37.50 or 4 for \$150. **Lessons must be used within one year of the start date.**

PROCEDURE: Fill out this form and return to the member services desk or email to bwisniewski@spymca.org. You will be contacted to arrange the lessons with an instructor who can accommodate your availability indicated below. After your first appointment is scheduled, please stop by the front desk to pay. Please contact the Aquatics Coordinator, Ben Wisniewski, at 715-952-9377 or bwisniewski@spymca.org with any questions.

Type of lesson desired: Private Lesson (30 Minutes) Semi-Private Lesson (30 Minutes)

PRIVATE LESSON

Name: _____ Age: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian Name(s): _____ E-mail: _____

Communication Preference: E-mail/Text Message/Phone Call/No preference

Number of Lessons Requested: 1 or 4 Preference: Male instructor/Female instructor/No preference

SEMI-PRIVATE LESSON

Name: _____ Age: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian Name(s): _____ E-mail: _____

Communication Preference: E-mail/Text Message/Phone Call/No preference

Number of Lessons Requested: 1 or 4 Preference: Male instructor/Female instructor/No preference

Days Available (circle all that apply): MON TUES WED THU FRI SAT

Times Available: _____ Date you wish to start: _____

Number of Lessons you would like to do each week: _____

Swimming Ability: Please describe students' swimming strengths and areas of development. (For past swim lesson participants, include the level at which they were when they ended lessons).

Lesson Goals: Include any goals.

Special Considerations: Is there anything about the student that would be important for the instructor to know?