



Gaithersburg
A CHARACTER COUNTS! CITY

Gaithersburg Aquatic Center

2 Teacher's Way
Gaithersburg, MD 20877
301-258-6345

(phones answered only weekday evenings & weekend days)



Private Swim Lessons

Private Lessons might be for you if:

- You or your child missed out on a spot in group lessons, but want to start lessons right away
 - You or your child needs individualized coaching to improve stroke technique
 - You or your child are reluctant to participate in group lessons
- You or your child want to supplement group learning with one-on-one instruction
- The days and times of group lessons are not convenient for you or your child

While group lessons provide a very important learning environment, there are times when Private Lessons might be more suitable. Private Lessons at the **Gaithersburg Aquatic Center (301-258-6345)** offer the convenience and affordability of group lessons while offering individualized attention catered to the needs of the student.

LESSON COST: \$75 for three, half-hour classes scheduled at your convenience.

In order to request a private lesson session, please fill out the form stapled to this information flyer and return it to the Aquatic Center. Once we receive your form, it will be posted on the Instructor's Board where your form will be matched up with an appropriate instructor.

Once you have been matched with an instructor, you will be contacted to schedule your first set of three classes. You will be asked to provide your credit card information over the phone to confirm the Lesson Reservation. Once a reservation is made, it may not be cancelled unless in documented cases of illness requiring physician's care or death in the family.

*****Filling out the form does not guarantee a private lesson.**

Private lessons are filled on a first-come, first-served basis depending on instructor availability, pool space, and student's skills set matching with an instructor***

NOTE: Although these are private lessons, your instructor will be paid by the City. Please do not offer monetary tips to the instructors as this is against City policy.

Revised 09/30/2009



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PRIVATE SWIM LESSON REQUEST FORM

Student's Name: _____ Date of Birth: _____ M F
(or write "ADULT")

Email Address: _____ Parent's Name: _____
(If child is under 18)

Home Ph. _____ Cell Ph. _____ Work Ph. _____

Address: _____
Street Address City State Zip Code

Please check all of the student's current skills:

- _____ Fully submerge for at least 3 seconds
- _____ Float on their front and/or back with support
- _____ Float on their front and/or back without support
- _____ Push off wall on front and/or back and glide
- _____ Combine arms and kick on front and/or back
- _____ Swim the width of pool, any stroke
- _____ Swim the length of pool, any stroke

Select your Day & Time preference(s)

- _____ Mon.-Thurs., 5:15-6:30pm (tot pool only)
- _____ Mon., Wed. 6:30-8pm (limited lap lanes)
- _____ Tues., Thurs., 6:30-8pm (no lap lanes)
- _____ Sat., 1-3pm (entire pool area available)

The student would like to request the following swimming instructor: _____

What are the student's goals? What would the student like to accomplish during these private lessons? Does the student have any special requests?

Through the registration process, I hereby grant permission for me/my child to attend the activity sponsored by the City of Gaithersburg. I understand that I am responsible for me/my child's insurance in case of injury. Furthermore, I understand that although safety precautions will be observed, the City of Gaithersburg, employees and agents will not be responsible for any personal property lost by me/my child or for any injury sustained in the program. I also consent to the City's use of any photographs and/or video tapes made of the program.

_____ **Print Participant Name (or Parent/Guardian if under 18)**

_____ **Signature of Participant (or Parent/Guardian if under 18)**

PAYMENT AGREEMENT

I understand that upon scheduling of the first session of Private Lessons, I will be asked for my credit card information via telephone. I hereby authorize my credit card to be charged for \$75.00. Private Lessons are non-refundable / non-transferable unless in documented cases of illness requiring physician's care or death in the family.

Card Type: Visa / MC / DISC **Last 4 Digits of Credit Card:** _____ **Exp. Date** _____ / _____

_____ **Cardholder's Name**

_____ **Cardholder's Signature**

FOR OFFICE USE ONLY

Date Received: _____ Cashier's Initials: _____

Date Student was Contacted: _____ Lesson Coordinator's Initials: _____

Assigned Instructor: _____ Lesson Coordinator's Initials: _____